01/31/2011 15:08

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example: If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines American Hospital Association PAC 325 Seventh Street, NW ADDRESS (number and street) Suite 700 Check if different than previously Washington DC 20004 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00106146 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Runoff (30R) Post -Election General (30G) Special (30S) Report for the: Termination Report (TER) in the Election on State of 23 2010 12 3 1 2010 1 1 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Melinda Hatton Type or Print Name of Treasurer Electronically Filed by Ms. Melinda Hatton 0 1 3 1 2011 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

## **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

2 / 208

Write or Type Committee Name American Hospital Association PAC

FEC Form 3X (Rev. 02/2003)

" D 11 23 2010 12 31 2010 From: Report Covering the Period: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2010° 2190847.18 January 1 (b) Cash on Hand at 1528621.21 Begining of Reporting Period ..... 325957.88 2019938.59 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 1854579.09 4210785.77 6(a) and 6(c) for Column B) ..... 18105.90 2374312.58 Total Disbursements (from Line 31) ..... Cash on Hand at Close of Reporting Period 1836473.19 1836473.19 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... X This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

## DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) 3 / 208

Write or Type Committee Name

American Hospital Association PAC

Report Covering the Period:

м м 1 1

From:

<sup>D</sup> 23

Y Y W Y 2 0 1 0

то.

м м 12 <sup>D</sup> 31

Y Y Y Y Y 2 0 1 0

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11.	Contributions (other than loans) From: (a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	162769.02	928796.94
	(ii) Unitemized	68971.72	388968.66
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	231740.74	1317765.60
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	10000.00	10000.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	241740.74	1327765.60
12.	Transfers From Affiliated/Other Party Committees	84040.00	655522.61
13.	All Loans Received	0.00	0.00
	Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
16	(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	14637.54
10.	to Federal candidates and Other Political Committees	0.00	19750.00
17.	Other Federal Receipts (Dividends, Interest, etc.)	177.14	2262.84
8.	Transfers from Non-Federal and Levin Funds		
	(a) Non-Federal Account (from Schedule H3)	0.00	0.00
	(b) Levin Funds (from Schedule H5)	0.00	0.00
	(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
9.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	325957.88	2019938.59
0.	Total Federal Receipts (subtract Line 18(c) from Line 19)	325957.88	2019938.59

### **DETAILED SUMMARY PAGE**

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 208

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21.	Operating Expenditures:  (a) Shared Federal/Non-Federal		1
	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share		
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating	205.00	12045.07
	Expenditures	305.90	13045.27
	(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	305.90	13045.27
22.	Transfers to Affiliated/Other Party		
2	Committees Contributions to	0.00	0.00
.0.	Federal Candidates/Committees and Other Political Committees	15300.00	1445525.31
4.	Independent Expenditure		
5	(use Schedule E)	0.00	910324.50
.J.	Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
6	Loan Repayments Made	0.00	0.00
.0.	Loan Repayments Made		
	Loans Made Refunds of Contributions To:	0.00	0.00
-	(a) Individuals/Persons Other	500.00	1225.00
	Than Political Committees		
	(b) Political Party Committees	0.00	0.00
	(c) Other Political Committees (such as PACs)	-500.00	-500.00
	(d) Total Contribution Refunds		
	(add Lines 28(a), (b), and (c))	0.00	725.00
29.	Other Disbursements	2500.00	4692.50
	Fordered Floration Autility (O.H.C.O. 404 (OO))		
oU.	Federal Election Activity (2 U.S.C 431(20))  (a) Shared Federal Election Activity		
	(from Schedule H6)	2.22	
	(i) Federal Share	0.00	0.00
	(ii) "Levin" Share	0.00	0.00
	(b) Federal Election Activity Paid Entirely	2.22	0.00
	With Federal Funds	0.00	0.00
	(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31.	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	18105.90	2374312.58
20	Total Fodoral Diaburagements		
32.	Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)		
	from Line 31)	18105.90	2374312.58

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 208

1 LC FOIII 3X (Nev. 02/2003)		
III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Total Contributions (other than loans)     from Line 11(d), page 3)	241740.74	1327765.60
4. Total Contribution Refunds (from Line 28(d))	0.00	725.00
5. Net Contributions (other than loans) (subtract Line 34 from Line 33)	241740.74	1327040.60
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	305.90	13045.27
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	14637.54
Net Operating Expenditures     (subtract Line 37 from Line 36)	305.90	-1592.27

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17	
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Andy Van Pelt		Date of Receipt	
Mailing Address 4000 Kruse Way Place Building 2, Suite 100		11 23 4 2010	
City <u>Lake Oswego</u>	State Zip Code OR 97035-5545	Transaction ID: 18757859  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	22.50	
Name of Employer Oregon Association of Hospitals & Heal Receipt For:  ☐ Primary ☐ General Other (specify) ▼	Occupation Director of Communications  Aggregate Year-to-Date   262.50		
Full Name (Last, First, Middle Initial)  Ms. Andrea Easton  Mailing Address 258 Evergreen Road		Date of Receipt	
#4 City	State Zip Code	11 23 2010	
Lake Oswego	OR 97034-3145	Transaction ID: 18757860  Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	10.94	
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Director of Advocacy		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 488.94		
Full Name (Last, First, Middle Initial) Ms. Mary Ensslin		Date of Receipt	
Mailing Address 1249 S. Cedar Crest B	Mailing Address 1249 S. Cedar Crest Boulevard		
City	State Zip Code PA 18103-6202	Transaction ID: 18769612	
Allentown  FEC ID number of contributing federal political committee.	PA 18103-6202	Amount of Each Receipt this Period  350.00	
Name of Employer Lehigh Valley Health Netw- ork	Occupation Vice President, Gov't & Leg		
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (optional)		383.44	
TOTAL This Period (last page this line number	only)		

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial)  A. Mr. Robert Hoefer		Date of Receipt
Mailing Address 2404 Millwood Road		11 30 7 2010
City	State Zip Code VA 23454-1730	Transaction ID: 18769613
Virginia Beach	VA 23454-1730	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Sentara Healthcare	Occupation Director of Surgical Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial)  B. Ms. Nancy Foster		Date of Receipt
Mailing Address 10005 Leafy Avenue		11 24 2010
City	State Zip Code	Transaction ID: 18769615
Silver Spring	MD 20910-1021	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Quality & Patient Safe	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial)  Mr. Thomas P. Nickels		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	11 30 2010
City	State Zip Code	Transaction ID: 18769620
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer American Hospital Associa-	Occupation Sr. Vice President Federal Polations	
tion-Washingt Receipt For:	Sr. Vice President, Federal Relations  Aggregate Year-to-Date ▼	-
Primary General		
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (optional)		1850.00
TOTAL This Period (last page this line number	·	

# SCHEDULE A (FEC Form 3X)

	E A (FEC Form 3X) RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commerci	copied from such Reports and St ial purposes, other than using the COMMITTEE (In Full) Hospital Association PAC	atements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
Mr. Joseph L  Mailing Addr  City  Randolph  FEC ID num federal politic  Name of Em Gifford Medi  Receipt For:  Primar	ress P O Box 2000  Abber of contributing cal committee.  Apployer ical Center		Zip Code 05060-2000 n t and Chief Executive Office e Year-to-Date ▼	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mr. Steven H Mailing Addr  City Clayton  FEC ID num federal politic  Name of Em BJC Health  Receipt For: Primar	nber of contributing cal committee.		Zip Code 63105-2914  n t and Chief Executive Office e Year-to-Date	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City  Birmingha  FEC ID num federal politic  Name of Em UAB Health  Receipt For:	nber of contributing cal committee. nployer System	State AL  C  Occupatio Chief Exc	Zip Code 35233-3110  n ecutive Officer e Year-to-Date ▼ 1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of	f Receipts This Page (optional)			2350.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	d Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Dr. Michael Waldrum, , M.D.  Mailing Address 619 19th Street Sou	ıth.	Date of Receipt
		11 30 2010
City <u>Birmingha</u> m	State Zip Code AL 35249-1900	Transaction ID: 18769743  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University of Alabama Hos- pital	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Reid F Jones		Date of Receipt
Mailing Address 7634 Cottonridge R	d	11 30 2010
City	State Zip Code	Transaction ID: 18769744
Trussville  FEC ID number of contributing federal political committee.	AL 35173-2607	Amount of Each Receipt this Period 500.00
Name of Employer UAB Health System	Occupation Executive -VP UAHSF	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Tommy McDougal		Date of Receipt
Mailing Address 253 Cashaba Oaks	Trail	1 1 3 0 Y Y Y Y Y Y
City Indian Springs	State Zip Code AL 35124-3334	Transaction ID: 18769749
FEC ID number of contributing federal political committee.	AL 35124-3334	Amount of Each Receipt this Period 400.00
Name of Employer Medical West	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	
SUBTOTAL of Receipts This Page (optiona	l)	1400.00
	ber only)	

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms.` Jeanetta Corbett Keller  Mailing Address 3200 Salisbury Rd  City  Birmingham  FEC ID number of contributing federal political committee.  Name of Employer UAB Health System  Receipt For:  Primary General  Other (specify)	State Zip Code AL 35213-3515  C  Occupation Chief Administrative Officer  Aggregate Year-to-Date ▼  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 1 1 3 0 2 0 1 0  Transaction ID: 18769753  Amount of Each Receipt this Period  350.00
Full Name (Last, First, Middle Initial) Mr. Gary W Pulsipher  Mailing Address 2727 McClelland Boul  City Joplin  FEC ID number of contributing federal political committee.  Name of Employer St. John's Regional Medical Center  Receipt For: Primary General Other (specify)	State Zip Code MO 64804-1626  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 1 1 2 9 2 2 0 1 0  Transaction ID: 18770458  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr. Kevin E Lofton, , FACHE  Mailing Address 1999 Broadway, Suite  City  Denver  FEC ID number of contributing federal political committee.  Name of Employer Catholic Health Initiatives  Receipt For:  Primary General  Other (specify)	State Zip Code CO 80202-5703  C  Occupation President Emeritus  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional) .	<b>•</b>	1100.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any pers he name and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David T Underriner Mailing Address 2690 Surrey Lane  City West Linn  FEC ID number of contributing federal political committee.  Name of Employer Providence Milwaukie Hosp-	State Zip Code OR 97068-2268  C Occupation	Date of Receipt    M M
ital Receipt For:  Primary General  Other (specify) ▼	Interim Administrator  Aggregate Year-to-Date ▼  500.00	
Full Name (Last, First, Middle Initial) Ms. Linda Lang Mailing Address 4000 Kruse Way Pla	ace #2-100	Date of Receipt  1 1 2 3 2 0 1 0
City	State Zip Code	Transaction ID: 18779329
Lake Oswego  FEC ID number of contributing	OR 97035-2543	Amount of Each Receipt this Period
federal political committee.	C	30.00
Name of Employer Oregon Association of Hospitals & Heal Receipt For: Primary General Other (specify)	Occupation Director of Member Relations  Aggregate Year-to-Date   530.00	
Full Name (Last, First, Middle Initial) Mr. Eric Buckland	_ <b>I</b>	Date of Receipt
Mailing Address 1945 Wagtail Ct. NV	V	1 1 2 3 2 0 1 0
City	State Zip Code	Transaction ID: 18782737
Salem	OR 97304-2005	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	175.00
Name of Employer Salem Hospital	Occupation Administrator & Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)		221.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the	atements may name and add	not be sold or used by any persordress of any political committee to	
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms Linda K Jones, RN, BS, MB			Date of Receipt
Mailing Address 2801 North Gantenbein	n Avenue		1 1 2 3 2 0 1 0
City	State	Zip Code	Transaction ID: 18782742
Portland	OR	97227-1623	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		175.00
Name of Employer Legacy Emanuel Hospital	Occupation		1
and Health Cen		Nurse Executive	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Richard Cagen			Date of Receipt
Mailing Address 1235 NE 47th Avenue Suite 299			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18782762
<u>Portland</u>	OR	97229-8087	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Providence Health System	Occupation Chief Exe	n ecutive Officer-Portland Area	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Wayne Clark			Date of Receipt
Mailing Address 7555 SW Afton Lane			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18782763
Tigard	OR	97224-7680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Legacy Health System	Occupation VP, Com	n munity Relations & Marketin	
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)		<b>&gt;</b>	675.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>K</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports at or for commercial purposes, other than using	nd Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PA	<u> </u>		
Full Name (Last, First, Middle Initial) Mr Trent Green			Date of Receipt
Mailing Address 2211 Northeast 139	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Vancouver	State WA	Zip Code 98686-2742	Transaction ID: 18782764
FEC ID number of contributing federal political committee.	C	90000-2742	Amount of Each Receipt this Period 250.00
Name of Employer Legacy Health System	Occupatio Senior V		
Receipt For: Primary General Other (specify)	<del> </del>	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Marvin Haas			Date of Receipt
Mailing Address 2650 Siskiyou Blvd.			11 23 2010
City Medford	State OR	Zip Code 97504-8170	Transaction ID: 18782772
FEC ID number of contributing federal political committee.	C	37304-0170	Amount of Each Receipt this Period  250.00
Name of Employer Asante Health System	Occupatio Vice Pre-	n sident, Finance	
Receipt For:  Primary General  Other (specify) ▼		e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)			Date of Receipt
Mr. Timothy Herrmann  Mailing Address 1965 Alder Street			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State OR	Zip Code 97405-2937	Transaction ID: 18782773
Eugene FEC ID number of contributing federal political committee.	C	9/405-293/	Amount of Each Receipt this Period 250.00
Name of Employer Peace Harbor Hospital	Occupatio Vice Pres	n sident, Operations	
Receipt For:  Primary General  Other (specify) ▼	<del>- , '</del>	e Year-to-Date ▼ 250.00	
			750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 14 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any pere name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Duncan Neilson Mailing Address 17506 SE Walta Vista City	State Zip Code	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Milwaukie  FEC ID number of contributing federal political committee.	OR 97267-5547	Amount of Each Receipt this Period  250.00
Name of Employer Legacy Health System  Receipt For:  Primary General  Other (specify) ▼	Occupation Clinical VP  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Ms Karen M Shepard Mailing Address 3266 Lake Wood Driv	е	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18782775
Eugene FEC ID number of contributing federal political committee.	OR 97408-1601	Amount of Each Receipt this Period 250.00
Name of Employer St. Charles Health System, Inc.	Occupation CFO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Sonja Steves		Date of Receipt
Mailing Address 19300 SW 65th Aven		11 23 2010
City Portland	State Zip Code OR 97062-9741	Transaction ID: 18782776  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Legacy Salmon Creek Hospi- tal	Occupation Vice President Human Resources a	nd Mar
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional) .	•	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 15 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Ms. Pamela S Vukovich  Mailing Address 1919 NW Lovejoy St			Date of Receipt  111 23 2010
City Portland  FEC ID number of contributing federal political committee.	State OR	Zip Code 97209-1503	Transaction ID: 18782779  Amount of Each Receipt this Period  250.00
Name of Employer Legacy Health System  Receipt For:  Primary  General  Other (specify) ▼		n ice President and Chief Final e Year-to-Date ▼ 250.00	nc ]
Full Name (Last, First, Middle Initial)  Mr Greg Van Pelt  Mailing Address 506 Second Avenue,	, Suite 1200		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Seattle FEC ID number of contributing federal political committee.	State WA	Zip Code 98104-2329	Transaction ID: 18782780  Amount of Each Receipt this Period  500.00
Name of Employer Providence Health & Services Receipt For:  Primary General Other (specify) ▼		n sident and Chief Regional Op e Year-to-Date ▼ 500.00	per
Full Name (Last, First, Middle Initial) Mr. Anders Ramstad Mailing Address 207 SE 112th Ave			Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Portland  FEC ID number of contributing federal political committee.	State OR	Zip Code 97216	Transaction ID: 18782781  Amount of Each Receipt this Period  750.00
Name of Employer North Star Resources Group  Receipt For:  Primary General  Other (specify) ▼	Occupatio Financia Aggregate		
SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS  Any information copied from such Benorts and	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr David Blackmon Mailing Address P O Box 129		Date of Receipt  1 2 0 1 2 0 1 0
City	State Zip Code	Transaction ID: 18782817
Lawton	OK 73502-0129	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Comanche County Memorial Hospital Receipt For:  Primary General Other (specify) ▼	Occupation Chief Financial Officer  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Ms. Patricia Davis	1	Date of Receipt
Mailing Address 4414 Manchester Co	ourt	12 01 2010
City	State Zip Code	Transaction ID: 18782819
<u>Norman</u>	OK 73072-3915	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Oklahoma Hospital Associa- tion	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	
Full Name (Last, First, Middle Initial) Ms. Shelly Dunham		Date of Receipt
Mailing Address P O Box 489		1 2 0 1 2 0 1 0
City	State Zip Code	Transaction ID: 18782821
Okeene	OK 73763-0489	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42.00
Name of Employer Okeene Municipal Hospital	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 479.00	
SUBTOTAL of Receipts This Page (optional)	)	792.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may	y not be sold or used by any persor	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Traine and adv	areas of any political committee to	Solicit contributions from Such committee.
Full Name (Last, First, Middle Initial) Ms. LaWanna S. Halstead, RN, MPH			Date of Receipt
Mailing Address 4000 Lincoln Boulevar	rd		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State	Zip Code	Transaction ID: 18782824
Oklahoma City	OK	73105-5207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Oklahoma Hospital Associa-	Occupatio VP. Qua	n lity & Clinical Initiatives	
tion Receipt For:		e Year-to-Date ▼	1
Primary General Other (specify) ▼	7.991.094.0	250.00	
Full Name (Last, First, Middle Initial) Mr. David E. Morton, Dr. P.H.,			Date of Receipt
Mailing Address 2825 Natchez Trail			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18782828
Edmond	OK	73012-3622	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer American Hospital Associa- tion-Chicago	Occupatio Regional	n Executive	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Rick Snyder			Date of Receipt
Mailing Address 4000 Lincoln Boulevar	rd		1 2 0 1 2 2 0 1 0
City	State	Zip Code	Transaction ID: 18782831
Oklahoma City	OK	73105-5207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Oklahoma Hospital Associa- tion	Occupatio Vice Pres	n sident, Finance & Information	n
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
SUBTOTAL of Receipts This Page (optional)	1		1000.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 18 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports an	d Statements may not be sold or used by any persor the name and address of any political committee to s	13 14 15 16 n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		SOLICITO CONTRIBUTION CONTRIBUTION
Full Name (Last, First, Middle Initial) Ms. Mary Winters		Date of Receipt
Mailing Address 7750 N Chisholm H		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18782834
Yukon	OK 73099-9134	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Oklahoma Hospital Associa- tion	Occupation VP Education & Support Services	]
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Dr. Thomas C. Dolan, Ph.D., FAC		Date of Receipt
Mailing Address 339 Cottage Hill		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18789811
<u>Elmhurst</u>	IL 60126-3332	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer American College of Healt- hcare Executi	Occupation President and Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Larry C. Bourne		Date of Receipt
Mailing Address 424 Autumn Oak D	rive	M M / D D / Y Y Y Y Y Y 12 02 2010
City	State Zip Code	Transaction ID: 18789835
Madison	MS 39110-9148	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer HPI Company	Occupation President and CEO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	300.00	
	l)	770.00

# SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Sam W. Cameron Mailing Address 28 Waterford Place City Jackson FEC ID number of contributing federal political committee.  Name of Employer Mississippi Hospital Association Receipt For:	State Zip Code MS 39211-2945  C  Occupation President & Chief Executive Officer  Aggregate Year-to-Date	Date of Receipt  1 2 0 2 2 1 0  Transaction ID: 18789836  Amount of Each Receipt this Period  20.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Charles L Denton	1132.50	Date of Receipt
Mailing Address 960 Avent Drive  City  Grenada  FEC ID number of contributing federal political committee.  Name of Employer Grenada Lake Medical Center Receipt For:  Primary General Other (specify)	State Zip Code MS 38901-5230  C  Occupation Chief Executive Officer Aggregate Year-to-Date  1093.50	Transaction ID: 18789839  Amount of Each Receipt this Period  216.00
Full Name (Last, First, Middle Initial) Mr. Randy King Mailing Address 7601 Southcrest Pa	State Zip Code	Date of Receipt    M
Southaven  FEC ID number of contributing federal political committee.	MS 38671-4739	Amount of Each Receipt this Period 5.50
Name of Employer Baptist Memorial Hospital- Desoto Receipt For:  Primary General Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   365.50	
SUBTOTAL of Receipts This Page (options	al)	241.50

## SCHEDULE A (FEC Form 3X)

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
r for commercial purposes, other than using th	Statements may not be sold or used by any per- ie name and address of any political committee	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Shawn Lea		Date of Receipt
Mailing Address 116 Woodgreen Cros		12 02 2010
City Madison	State Zip Code MS 39110-4522	Transaction ID: 18789845  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	17.09
Name of Employer Mississippi Hospital Asso- ciation	Occupation VP for Strategic Communications	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.90	
Full Name (Last, First, Middle Initial) Mr. Steve Lesley		Date of Receipt
Mailing Address 116 Woodgreen Cros	1 2 0 2 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 18789846
Madison	MS 39130-1909	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	23.34
Name of Employer Mississippi Hospital Asso- ciation	Occupation Director of Data Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	253.40	
Full Name (Last, First, Middle Initial) Dr. Marcella McKay, Ph.D.		Date of Receipt
Mailing Address 322 Helmsley Drive		12 02 2010
City	State Zip Code	Transaction ID: 18789847
Brandon	MS 39047-8159	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mississippi Hospital Asso- ciation	Occupation VP Nursing/CEO MHA Health, Rese	earch &
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 422.50	
SURTOTAL of Receipts This Page (optional)		290.43

Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Kenneth E. Alexander  Mailing Address 9521 Brookline Avenue  City Saton Rouge FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association	and address of any political committee to set tate   Zip Code   A  70809-8409    cupation   ief Governmental Officer & Legal C   gregate Year-to-Date   750.00	Date of Receipt    Date of Receipt
Mr. Clark R. Cosse, III  Mailing Address 9521 Brookline Avenue  City  Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Kenneth E. Alexander  Mailing Address 9521 Brookline Avenue  City Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association Receipt For: Primary General  Occ	A 70809-8409  cupation ief Governmental Officer & Legal C gregate Year-to-Date ▼  750.00  tate Zip Code	Date of Receipt    M
Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Kenneth E. Alexander  Mailing Address 9521 Brookline Avenue  City Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association Receipt For: Primary General	A 70809-8409  cupation ief Governmental Officer & Legal C gregate Year-to-Date ▼  750.00  tate Zip Code	Amount of Each Receipt this Period  750.00  Ou  Date of Receipt  1 2 0 1 2 0 1 0  Transaction ID: 18789989
FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Kenneth E. Alexander Mailing Address 9521 Brookline Avenue  City Service Baton Rouge FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association Receipt For: Primary General	cupation ief Governmental Officer & Legal C gregate Year-to-Date ▼  750.00	Date of Receipt    M
ation Receipt For:	ief Governmental Officer & Legal C gregate Year-to-Date  750.00  tate Zip Code	Date of Receipt  1 2 0 1 2 0 1 0  Transaction ID: 18789989
Mr. Kenneth E. Alexander  Mailing Address 9521 Brookline Avenue  City S  Baton Rouge L  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For: Ag  Primary General	_	1 2 0 1 2 0 1 0 Transaction ID: 18789989
Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For:  Primary General	_	Transaction ID: 18789989
Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For:  Primary General	_	
federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For: Primary  General	A 70809-1431	Amount of Each Receipt this Period
Louisiana Hospital Association  Receipt For: Primary General		500.00
Primary General	cupation  P, Quality and Regulatory Activities	
Other (Speedily)	gregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Wayne M Arboneaux		Date of Receipt
Mailing Address 135 Highway 402		1 2 0 1 2 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0
City	tate Zip Code	Transaction ID: 18789990
Napoleonville L	A 70390-2217	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.		500.00
Assumption Community Hosp- ital Ch	cupation ief Executive Officer	
Receipt For:  Primary  General  Other (specify) ▼	gregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)	<b>.</b>	1750.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule for each category of the Detailed Summary Page	(cincer only one)    X   11a   11b   11c   12
[		tatements may not be sold or used by any name and address of any political comm	y person for the purpose of soliciting contributions ittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Coletta Barrett, RN, MHA		Date of Receipt
	Mailing Address 5000 Hennessy Boulev  City	ard State Zip Code	1 2 0 1 2 0 1 0 Transaction ID: 18789991
	Baton Rouge	LA 70808-4375	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Our Lady of the Lake Regi- onal Medical	Occupation Vice President of Mission	
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 500.0	0
	Full Name (Last, First, Middle Initial) Mr. Louis H Bremer, , Jr.  Mailing Address P O Box 1901		Date of Receipt
			12 01 2010
	City	State Zip Code	Transaction ID: 18789992
	Monroe	LA 71210-1901	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer St. Francis Medical Center	Occupation President and Chief Executive C	Officer
	Receipt For: Primary General	Aggregate Year-to-Date ▼	
	Other (specify)	500.0	0
_	Full Name (Last, First, Middle Initial) Mr. Kevin Bridwell		Date of Receipt
	Mailing Address 9521 Brookline		12 01 2010
	City	State Zip Code	Transaction ID: 18789993
	Baton Rouge	LA 70809-1431	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Louisiana Hospital Associ- ation	Occupation Vice President of Healthcare Re	eimburse
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.0	0
	SUBTOTAL of Receipts This Page (optional)		1500.00
H	SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		1500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 23 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may	v not be sold or used by any pers	13 14 15 16 on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC	e name and add	aress of any political committee it	) Solicit Contributions from Such Committee.
Full Name (Last, First, Middle Initial) Mr Tatsy Jeter			Date of Receipt
Mailing Address 9521 Brookline Avenu	ie		1 2 0 1 2 0 1 0
City	State	Zip Code	Transaction ID: 18789994
Baton Rouge	LA	70809-1431	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Louisiana Hospital Associ-	Occupation		
ation	<del></del>	P, Finance & CFO	$\dashv$
Primary General	Aggregate	e Year-to-Date ▼	_
Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Mr. Mark E Marley, , FACHE			Date of Receipt
Mailing Address P O Box 2009			1 2 0 1 2 0 1 0
City	State	Zip Code	Transaction ID: 18789995
Natchitoches	LA	71457-2009	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Natchitoches Regional Med- ical Center	Occupation Chief Exe	n ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Karen Mixon, RN, MSHA			Date of Receipt
Mailing Address 1635 Marvel Street			12 01 2010
City	State	Zip Code	Transaction ID: 18789996
Coushatta	LA	71019-9022	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer CHRISTUS Coushatta Health Care Center	Occupation Administ		
Receipt For:	<del>-, '</del>	e Year-to-Date	7
Primary General Other (specify) ▼	33 23	500.00	]
SUBTOTAL of Receipts This Page (optional) .	1		1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 24 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Phyllis Peoples, , MSN, R.N  Mailing Address P O Box 6037  City Houma  FEC ID number of contributing federal political committee.  Name of Employer Terrebonne General Medical Center Receipt For: Primary General Other (specify)	State Zip Code LA 70361-6037  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date   500.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Ms. Karen Sue Zoeller  Mailing Address 9521 Brookline Avenue  City  Baton Rouge  FEC ID number of contributing federal political committee.  Name of Employer Louisiana Hospital Association  Receipt For:  Primary General		Date of Receipt    M M / D D / Y 2 0 1 0
Full Name (Last, First, Middle Initial) Ms. Lisa R. Lauve, RN, BSN Mailing Address 3330 Masonic Drive  City Alexandria  FEC ID number of contributing federal political committee.  Name of Employer CHRISTUS St. Frances Cabr-	State Zip Code LA 71301-3841  C Occupation	Date of Receipt  M M M / D D D / Y Y Y Y Y  Transaction ID: 18790002  Amount of Each Receipt this Period  350.00
ini Hospital Receipt For:  Primary General Other (specify) ▼  SUBTOTAL of Receipts This Page (optional) .	Regional Chief Nursing Executive and Aggregate Year-to-Date ▼  350.00	1350.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Benorts at	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 25 / 208 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAG	the name and address of any political committee to	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Dierdre Barfield, M.D. Mailing Address 2105 Airline Drive		Date of Receipt
	Ohaha 7in Oada	12 01 2010
City Bossier City	State Zip Code LA 71111-3105	Transaction ID: 18790003  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer CHRISTUS Schumpert Health System	Occupation Vice President Medical Affairs and CM	- 10
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Charles D. Daigle	I	Date of Receipt
Mailing Address 8001 Youree Drive		M M / D D / Y Y Y Y Y Y 1 2 0 1 0
City	State Zip Code	Transaction ID: 18790004
Shreveport	LA 71115-2302	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Willis-Knighton Medical Center	Occupation Chief Operating Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. M. Bryan Day	I	Date of Receipt
Mailing Address 104 North Third Str	eet	12 01 YYYY 12 01 2010
City	State Zip Code	Transaction ID: 18790005
Alexandria	LA 71301-8581	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Promise Hospital of Baton Rouge	Occupation Senior Vice President Eastern Region	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	I)	750.00

	HEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 26 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any i	information copied from such Reports and r commercial purposes, other than using th	Statements may e name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	AME OF COMMITTEE (In Full) American Hospital Association PAC			
. <u>M</u>	ull Name (Last, First, Middle Initial) Is. Cindy L. Dolan, CPA			Date of Receipt
_	failing Address P.O. Box 40318			12 01 2010
	city	State LA	Zip Code	Transaction ID: 18790006
F	Baton Rouge  EC ID number of contributing ederal political committee.	C	70816-8359	Amount of Each Receipt this Period 250.00
N H	lame of Employer ISLI	Occupation President		
R	leceipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 250.00	
. <u>M</u>	ull Name (Last, First, Middle Initial) fr. Glenn Landry	<u> </u>		Date of Receipt
M	lailing Address P.O. Box 40318			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
C	ity	State	Zip Code	Transaction ID: 18790007
<u>B</u>	Baton Rouge	LA	70835-0318	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		250.00
N L	lame of Employer HA Trust Funds/HSLI	Occupation Executive	v VP Operations	
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
	ull Name (Last, First, Middle Initial) Ir David Mak			Date of Receipt
M	failing Address 1701 Oak Park Boule	vard		1 2 0 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	ity	State	Zip Code	Transaction ID: 18790008
	ake Charles	LA	70601-8911	Amount of Each Receipt this Period
	EC ID number of contributing ederal political committee.	C		275.00
p	lame of Employer ake Charles Memorial Hos- ital	<del>- '</del>	ident of Finance	
R	eceipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 275.00	
CIT	BTOTAL of Receipts This Page (optional) .	<u> </u>		775.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 27 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Mr. Michael Mouisset  Mailing Address 308 Stelly Rd.			Date of Receipt
City Carencro FEC ID number of contributing	State LA	Zip Code 70520-5329	Transaction ID: 18790009  Amount of Each Receipt this Period
federal political committee.  Name of Employer ShareCor  Receipt For:		n ecutive Officer	250.00
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)	7 ggregate	250.00	
Mr. John C Neal  Mailing Address P O Box 1670			Date of Receipt    M   M   D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State	Zip Code	Transaction ID: 18790010
Kinder	LA	70648-1670	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer Allen Parish Hospital		ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr Leif Pedersen	•		Date of Receipt
Mailing Address 1701 Oak Park Boul			12 01 7 2010
City Lake Charles	State LA	Zip Code 70601-8911	Transaction ID: 18790011
FEC ID number of contributing federal political committee.	C	70001-0911	Amount of Each Receipt this Period  250.00
Name of Employer Lake Charles Memorial Hos- pital		P-Philanthropy	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 28 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. John Steckler			Date of Receipt
Mailing Address 2450 Severn Avenue,	Suite 210		M M / D D / Y Y Y Y Y Y 1 1 2 0 1 0
City	State	Zip Code	Transaction ID: 18790012
Metairie	LA	70001-6942	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer ShareCor	Occupation Vice Pres		7
Receipt For:	<del>- '</del>	Year-to-Date ▼	$\dashv$
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Ms. Deborah White	•		Date of Receipt
Mailing Address 3330 Masonic Drive			1 2 0 1 2 0 1 0 1 0 1 0 1 0 1 0 1 0 1 0
City	State	Zip Code	Transaction ID: 18790013
Alexandria	LA	71301-3841	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer CHRISTUS St. Frances Cabr- ini Hospital	Occupation Chief Fin	n ancial Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Ms. Maureen Banks, RN, MS, MB			Date of Receipt
Mailing Address 42 Middlebury Lane			12 08 YYYYY 12 08 2010
City	State	Zip Code	Transaction ID: 18790041
Beverly	MA	01915-1300	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Spaulding Hospital for Co- ntinuing Medi	Occupation Presiden		
Receipt For:	Aggregate	Year-to-Date V	
Primary General Other (specify) ▼	0 0	500.00	
			1000.00

	for each category of the Detailed Summary Page	(check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Sean McKibben		Date of Receipt
Mailing Address 44 Blaine Avenue  City	State Zip Code	1 2 0 3 2 0 1 0 Transaction ID: 18790069
Cleveland	OH 44146-2709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospitals Bedf- ord Medical C	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Cliff J. Coker		Date of Receipt
Mailing Address 11470 Euclid Avenue Suite 32	State Zip Code	12 03 2010
City Cleveland	OH 44106-3938	Transaction ID: 18790070  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 44100 3300	500.00
Name of Employer St. John West Shore Hospi- tal	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Keith E. Maitland		Date of Receipt
Mailing Address 31415 Tuttle Drive		12 03 2010
City Bay Village	State Zip Code OH 44140-1515	Transaction ID: 18790071  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospital	Occupation President, UH Home Care	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	<b>.</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	n for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		areas or any political committee to	Solicit contributions from Such committee.
Full Name (Last, First, Middle Initial) Mr. Robert David			Date of Receipt
Mailing Address 870 West Main Stre	eet		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Geneva	State OH	Zip Code 44041-1219	Transaction ID: 18790072  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11011 1210	500.00
Name of Employer University Hospitals Geneva Medical Ce Receipt For:  Primary General Other (specify) ▼	1	n t and Chief Executive Officer Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Catherine Koppelman Mailing Address 3033 Crafton Road			Date of Receipt
City	State	Zip Code	Transaction ID: 18790139
Beachwood	OH	44122-3246	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer University Hospitals	Occupation Chief Nu	n rsing Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Elizabeth Demarco Novak	l		Date of Receipt
Mailing Address 3531 Thornapple La	ane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Pepper Pike	State OH	Zip Code 44124-5539	Transaction ID: 18790142  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	44124-3333	250.00
Name of Employer University Hospitals Case Medical Cent Receipt For:		sident and Chief Financial Of	f
Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 31 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements mand add	not be sold or used by any persolates of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Robin Rowell-Leinweber Mailing Address 4337 Parklawn Drive			Date of Receipt  1 2 0 3 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7
City Willoughby	State OH	Zip Code 44094-7936	Transaction ID: 18790143  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University Hospitals Case Medical Cent Receipt For:  Primary General Other (specify) ▼	Occupatio Vice Pres Aggregate		
Full Name (Last, First, Middle Initial) Ms. Jane Dus Mailing Address 21872 Eaton Rd	•		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18790167
Fairview Park	OH	44126-2312	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University Hospitals Case Medical Cent	<del>_, '</del>	sident, Nursing	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Nancy Tinsley	•		Date of Receipt
Mailing Address 20348 Kylemore Dr			12 03 2010
City	State	Zip Code	Transaction ID: 18790177
Strongsville	OH	44149-0939	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		250.00
Name of Employer University Hospital	Occupatio Vice Pres	sident	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>(</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 32 / 208 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Ms. Bridget A. Gargan  Mailing Address 54 West Weisheim	er Road		Date of Receipt
City Columbus FEC ID number of contributing	State OH	Zip Code 43214-2545	1 2 0 3 2 0 1 0  Transaction ID: 18790191  Amount of Each Receipt this Period  100.00
Name of Employer Ohio Hospital Association  Receipt For: Primary General Other (specify)	Occupation Vice Pres	ident, State Policy & Advoca Year-to-Date ▼ 375.00	
Full Name (Last, First, Middle Initial) Mr. Bruce James Mailing Address 101 Poolside Ln			Date of Receipt  1 2 0 3 2 0 1 0
City  Dover  FEC ID number of contributing federal political committee.	State OH	Zip Code 44622-9565	Transaction ID: 18790193  Amount of Each Receipt this Period  250.00
Name of Employer Union Hospital  Receipt For: Primary General Other (specify)		cutive Officer Year-to-Date  250.00	
Full Name (Last, First, Middle Initial) Mr. Don F. Paulson Mailing Address 13425 Longspur Ci	 i.		Date of Receipt
City  Valley View  FEC ID number of contributing federal political committee.	State OH	Zip Code 44125-5449	Transaction ID: 18790200  Amount of Each Receipt this Period  250.00
Name of Employer University Hospital  Receipt For:  Primary General  Other (specify) ▼		ident, Finance Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	  (le		600.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 33 / 208 (check only one)    X   11a
Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may n name and addre	ot be sold or used by any persons of any political committee to	
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Dr. Archilles A. Demetriou, MD			Date of Receipt
Mailing Address 1954 Epping Road			12 03 YYYY 12 03
City	State	Zip Code	Transaction ID: 18790201
Gates Mills	OH	44040-9680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer University Hospitals	Occupation CEO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Alan Perkins			Date of Receipt
Mailing Address 30210 Wolf Rd			M M / D D / Y Y Y Y Y Y Y 12 03 2010
City	State	Zip Code	Transaction ID: 18790210
Bay Village	ОН	44140-1617	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer University Hospital	Occupation Director, El	MR Project Management	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Y	ear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Thomas F Zenty, III			Date of Receipt
Mailing Address 11100 Euclid Avenue			1 2 0 3 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18790214
Cleveland	OH	44106-1716	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer University Hospitals	Occupation Chief Execu	utive Officer	
Receipt For: Primary General Other (specify)	Aggregate Y	ear-to-Date ▼ 500.00	]
SUBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 34 / 208 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Ronald Dziedzicki Mailing Address 3483 Lexington Lai	ne		Date of Receipt
City Brunswick  FEC ID number of contributing federal political committee.	State OH	Zip Code 44212-1883	Transaction ID: 18790231  Amount of Each Receipt this Period  500.00
Name of Employer University Hospitals Case Medical Cent Receipt For: Primary General Other (specify)	Occupatio Chief Su	n pport Services Officer e Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. George Purnell Mailing Address 835 Medical Center	r Drive		Date of Receipt  1 2 0 2 2 0 1 0
City West Point  FEC ID number of contributing federal political committee.	State MS	Zip Code 39773-9320	Transaction ID: 18790243  Amount of Each Receipt this Period  315.50
Name of Employer North Mississippi Medical Center-West Receipt For: Primary General Other (specify)	Occupatio Trustee	n e Year-to-Date ▼ 315.50	
Full Name (Last, First, Middle Initial) Mr. J. Robert Bray Mailing Address 3101 Garland Dr			Date of Receipt
City Portsmouth  FEC ID number of contributing federal political committee.	State VA	Zip Code 23703-4525	1 2 0 2 2 0 1 0  Transaction ID: 18790264  Amount of Each Receipt this Period  350.00
Name of Employer Bon Secours-DePaul Medical Center Receipt For: Primary General Other (specify)	Occupatio Trustee Aggregate	o Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional	al)		1165.50

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 35 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	he name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Mr. Brian Gradle  Mailing Address 400 Great Falls St			Date of Receipt
City Falls Church FEC ID number of contributing	State VA	Zip Code 22046-2608	1 2 0 2 2 0 1 0  Transaction ID: 18790266  Amount of Each Receipt this Period  200.00
Name of Employer Bon Secours-Richmond Community Hospita Receipt For: Primary General Other (specify)	Occupatio Vice Pres	n sident Corporate • Year-to-Date ▼	
Full Name (Last, First, Middle Initial) Mr. R Edward Howell Mailing Address P O Box 800809			Date of Receipt  1 2 0 2 2 0 1 0
City	State	Zip Code	Transaction ID: 18790267
Charlottesville	VA	22908-0809	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer University of Virginia Medical Center Receipt For:  Primary General  Other (specify) ▼	_ , '	n sident and Chief Executive C e Year-to-Date ▼ 350.00	Off
Full Name (Last, First, Middle Initial) Ms. Mary C. Becker			Date of Receipt
Mailing Address 7800 South Eagle R	oad		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City	State	Zip Code	Transaction ID: 18790272
Columbia  FEC ID number of contributing federal political committee.	C	65203-9017	Amount of Each Receipt this Period 48.09
Name of Employer Missouri Hospital Associa- tion		P, Commc. & Health Improv	ement
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 385.00	
SUBTOTAL of Receipts This Page (optional)	)		598.09

ITEMIZE  Any informat	ULE A (FEC Form 3X) ED RECEIPTS  tion copied from such Reports and Sta	atements ma	Use separate schedule(s) for each category of the Detailed Summary Page y not be sold or used by any person	FOR LINE NUMBER: PAGE 36 / 208 (check only one)    X
or for commo	ercial purposes, other than using the r F COMMITTEE (In Full) an Hospital Association PAC	name and add	dress of any political committee to	solicit contributions from such committee.
Mr. Danie	e (Last, First, Middle Initial) Il R. Landon Iddress 1811 Forest Park Court	•		Date of Receipt
	duicss 1611 Folest Falk Coult	<u> </u>		12 03 2010
City	O't	State	Zip Code	Transaction ID: 18790280
	number of contributing olitical committee.	C	65109-9782	Amount of Each Receipt this Period  62.50
tion Receipt F	Employer Hospital Associa- For: mary General ner (specify)	-	n President, Governmental Re e Year-to-Date ▼ 500.00	at
Ms. Kathle	e (Last, First, Middle Initial) een C. Poff ddress 5119 Coventry Waye			Date of Receipt  1 2 0 3 2 0 1 0
City		State	Zip Code	Transaction ID: 18790284
<u>Jefferso</u>	on City	MO	65101-8284	Amount of Each Receipt this Period
	number of contributing olitical committee.	C		48.09
<u>tion</u>	Employer Hospital Associa-	Occupatio Senior V	n ice President & CFO	
	For: mary	Aggregate	e Year-to-Date ▼ 385.00	
Full Nam Mr. Jerry	e (Last, First, Middle Initial) M. Sill			Date of Receipt
Mailing A	ddress 2906 Valley View Terra	ce		1 2 0 3 2 0 1 0
City		State	Zip Code	Transaction ID: 18790286
<u>Jefferso</u>	on City	MO	65109-1069	Amount of Each Receipt this Period
	number of contributing olitical committee.	C		48.09
Missouri <u>tion</u>	Employer Hospital Associa-	-	ice President & General Cou	nse
	For: mary ☐ General ner (specify) ♥	Aggregate	e Year-to-Date ▼ 385.00	
SUBTOTAL	L of Receipts This Page (optional)			158.68

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 37 / 208 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Robert E Simpson, Jr., DSW, Mailing Address P O Box 803			Date of Receipt
City Brattleboro	State VT	Zip Code 05302-0803	Transaction ID: 18790303  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		350.00
Name of Employer Brattleboro Retreat Receipt For:	1	n t and Chief Executive Office y Year-to-Date ▼	<u>,                                     </u>
Primary General Other (specify) ▼	0 0	350.00	
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein Mailing Address 27 Harvest Lane			Date of Receipt  1 2 0 3 2 0 1 0
City	State	Zip Code	Transaction ID: 18790307
Livingston	NJ	07039-2750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer New Jersey Hospital Assoc- iation	<del></del>	sident Continuing Care Servi	се
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 450.00	
Full Name (Last, First, Middle Initial) Mr. Spiridon Hatiras	<u>'</u>		Date of Receipt
Mailing Address 35 Magnolia Avenue	e 		12 03 2010
City	State	Zip Code	Transaction ID: 18790310
Jersey City  FEC ID number of contributing federal political committee.	NJ C	07306-1401	Amount of Each Receipt this Period  250.00
Name of Employer Hoboken University Medical Center	Occupation CEO	_	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		620.00

		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may ne name and add	not be sold or used by any persoress of any political committee to	
American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Mr. Gerard J Jablonowski  Mailing Address 8 Jacqueline Place			Date of Receipt  1 2 0 3 2 0 1 0
City Sewell	State NJ	Zip Code 08080-2450	Transaction ID: 18790311  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer St. Francis Medical Center	C		250.00
Receipt For: Primary General Other (specify)	<del>-                                     </del>	and Chief Executive Officer Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial)  Ms. Virginia Newman Littell  Mailing Address 49 Church Street P.O. Box 328			Date of Receipt  1 2 0 3 2 0 1 0
City	State	Zip Code	Transaction ID: 18790313
Franklin	NJ	07416-0328	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		1000.00
Name of Employer Saint Clare's Hospital	Occupation Trustee		
Receipt For:	Aggregate	Year-to-Date ▼	
Primary General Other (specify) ▼		1000.00	]
Full Name (Last, First, Middle Initial) Mr. Gary L. Long	•		Date of Receipt
Mailing Address 2 Meadowview Drive			12 03 2010
City	State	Zip Code	Transaction ID: 18790314
Shamong FEC ID number of contributing	NJ	08088-8596	Amount of Each Receipt this Period
federal political committee.	C		250.00
Name of Employer Virtua Health	Occupation COO		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			1500.00

SCHEDULE A	A (FEC Form 3X) ECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 39 / 208 (check only one)    X
or for commercial pu	rposes, other than using the n	tements may ame and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Ms Ninfa M. Saun	120 Muirfield Court  of contributing ommittee.		Zip Code 08057-3954  n e Vice President Year-to-Date ▼ 500.00	Date of Receipt  1 2 0 3 2 0 1 0  Transaction ID: 18790320  Amount of Each Receipt this Period  500.00
Mr Wayne C Schif	158 Hearthstone Drive of contributing ommittee. er althcare  General		Zip Code 08009-9550 ne Vice President Year-to-Date ▼	Date of Receipt  1 2 0 3 2 0 1 0  Transaction ID: 18790321  Amount of Each Receipt this Period  500.00
Full Name (Last, Mr. James Angle Mailing Address  City Pittsgrove  FEC ID number of federal political county Name of Employe Memorial Hospital County Receipt For: Primary Other (spec	ommittee.  or of Salem  General	State NJ C Occupation CEO Aggregate	Zip Code 08318-9184	Date of Receipt    M
SUBTOTAL of Rec	eipts This Page (optional)			1250.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 40 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
\ \ \	Any information copied from such Reports and Stor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>.</b> .	Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest Blv	vd.		Date of Receipt
	City <u>Manasquan</u>	State NJ	Zip Code 08736-4001	Transaction ID: 18790325  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		10.00
	Name of Employer New Jersey Hospital Association Receipt For:  Primary General  Other (specify) ▼		ormation Officer e Year-to-Date ▼  240.00	
3.	Full Name (Last, First, Middle Initial) Ms. Kimberly A. Champi Krenik Mailing Address 605 Upland Place			Date of Receipt  1 2 1 0 2 0 1 0
	City	State	Zip Code	Transaction ID: 18790326
	Alexandria  FEC ID number of contributing federal political committee.	C	22301-2743	Amount of Each Receipt this Period 1500.00
	Name of Employer New Jersey Hospital Assoc- iation Receipt For:		n Federal Legislative Affairs e Year-to-Date	
	Primary General Other (specify) ▼	0 0	1500.00	
. –	Full Name (Last, First, Middle Initial) Ms. Jessica Cohen			Date of Receipt
	Mailing Address 760 Alexander Road			12 10 2010
	City	State	Zip Code	Transaction ID: 18790328
	Princeton  FEC ID number of contributing federal political committee.	NJ C	08540-6305	Amount of Each Receipt this Period  10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupatio Director	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 235.00	
	SUBTOTAL of Receipts This Page (optional)			1520.00
	TOTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 41 / 208 (check only one)    X
A or	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper		Date of Receipt
	Mailing Address 121 Clear Creek Road		12 10 2010
	City Langhorne	State Zip Code PA 19047	Transaction ID: 18790329  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer New Jersey Hospital Association Receipt For:  Primary General	Occupation Vice President, Human Resources  Aggregate Year-to-Date ▼  480.00	
	Full Name (Last, First, Middle Initial)  Ms. Mary A. Ditri  Mailing Address 9 Jumping Brook Drive		Date of Receipt
	City	State Zip Code	12 10 2010
	Neptune	NJ 07753-3326	Transaction ID: 18790331  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Association Receipt For: Primary General Other (specify)	Occupation Director  Aggregate Year-to-Date   230.00	
	Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein		Date of Receipt
	Mailing Address 27 Harvest Lane		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18790332
	Livingston FEC ID number of contributing federal political committee.	NJ 07039-2750	Amount of Each Receipt this Period  10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President Continuing Care Service	De Ce
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	
Γ,	SUBTOTAL of Receipts This Page (optional)		270.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 42 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Alice J. Guttler Mailing Address 7 Ambrosia Way  City Freehold  FEC ID number of contributing federal political committee.  Name of Employer CentraState Healthcare System Receipt For: Primary General	State Zip Code NJ 07728-4020  C  Occupation Senior Vice President and Corporate Aggregate Year-to-Date	Date of Receipt    M M M
Other (specify)  Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountai	250.00 n Road	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 18790336
New Hope	PA 18938	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Sr. VP., Health Economics	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 684.18	]
Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs		Date of Receipt
Mailing Address 23 E. Delaware Aver		12 10 7 2010
City	State Zip Code NJ 08534-2302	Transaction ID: 18790338
Pennington  FEC ID number of contributing federal political committee.	C 08534-2302	Amount of Each Receipt this Period  10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation General Counsel	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
	•	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 43 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William D. Kennedy Mailing Address 1549 North Valley Ro City Malvern FEC ID number of contributing federal political committee.	ad  State Zip Code PA 19355  C	Date of Receipt  1 2
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Senior Vice President  Aggregate Year-to-Date   240.00	
Full Name (Last, First, Middle Initial) Mr. Timothy J. Keough Mailing Address 23 Nelson Drive		Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 18790340
Barnegat  FEC ID number of contributing federal political committee.	NJ 08005-2174	Amount of Each Receipt this Period  10.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Vice President, Health Information I  Aggregate Year-to-Date   240.00	Mgm
Full Name (Last, First, Middle Initial) Mr. Steve E. Krebs	_ <b>L</b>	Date of Receipt
Mailing Address 73 Tindall Rd		12 10 2010
City Robbinsville	State Zip Code NJ 08691-2508	Transaction ID: 18790341
FEC ID number of contributing federal political committee.	C 08691-2508	Amount of Each Receipt this Period
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Director, Conference Services  Aggregate Year-to-Date   240.00	
SUBTOTAL of Receipts This Page (optional)	1	30.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 44 / 208 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any p ne name and address of any political committe	erson for the purpose of soliciting contributions be to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. David P. Lavins  Mailing Address 10 Fox Chase Road  City	State Zip Code	Date of Receipt  1 2 1 0 2 0 1 0  Transaction ID: 18790342
Malvern  FEC ID number of contributing federal political committee.	PA 19355	Amount of Each Receipt this Period 750.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Chief Financial Officer  Aggregate Year-to-Date ▼  980.00	·
Full Name (Last, First, Middle Initial) Mr. Marc H Lory Mailing Address 20 Farmingham Roa	d	Date of Receipt  1 2 1 0 2 0 1 0
City	State Zip Code	Transaction ID: 18790343
Ocean  FEC ID number of contributing federal political committee.	NJ 07712-7920	Amount of Each Receipt this Period 250.00
Name of Employer Meridian Health	Occupation Executive Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Kerry A. McKean-Kelly		Date of Receipt
Mailing Address 40 Imlaystown Road		12 10 2010
City East Windsor	State Zip Code NJ 08520-6209	Transaction ID: 18790344  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Assistant Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)		1010.00

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
or fo	information copied from such Reports and St or commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used be name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
<u></u> 1	Full Name (Last, First, Middle Initial) Mr. Randall J. Minniear Mailing Address 3901 Worthington Cou City	rt State Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
F	Freehold  FEC ID number of contributing ederal political committee.	NJ 07728	Amount of Each Receipt this Period 10.00
j	Name of Employer New Jersey Hospital Assoc- ation Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Senior VP, Government Rel Aggregate Year-to-Date ▼	40.00
<b>3.</b> _	Full Name (Last, First, Middle Initial) Ms. Joann M. Morgano Mailing Address 7 Cottonwood Drive		Date of Receipt
	City	State Zip Code	Transaction ID: 18790347
- F	Lumberton FEC ID number of contributing ederal political committee.	NJ 08048-5297	Amount of Each Receipt this Period  10.00
<u>i</u>	Name of Employer New Jersey Hospital Assoc- ation Receipt For: Primary General Other (specify)	Occupation Director, Marketing & Comm Aggregate Year-to-Date ▼	nunications 40.00
	Full Name (Last, First, Middle Initial) Ms. Sally Roslow		Date of Receipt
1	Mailing Address 21 Sparrow Walk		12 10 YYYY 12 10 2010
	City	State Zip Code	Transaction ID: 18790349
- F	Newtown FEC ID number of contributing ederal political committee.	PA 18940	Amount of Each Receipt this Period  10.00
<u>j</u>	Name of Employer New Jersey Hospital Assoc- ation	Occupation VP Development & Trustee	Relations
ſ	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	40.00
	BTOTAL of Receipts This Page (optional)		30.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS  Any information copied from such Reports and	for each category of the Detailed Summary Page  Statements may not be sold or used by any persor	FOR LINE NUMBER: PAGE 46 / 208  (check only one)    X
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	he name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Roger D. Sarao, Jr.  Mailing Address 4 Poppy Lane		Date of Receipt  1 2 1 0 2 0 1 0
City	State Zip Code	Transaction ID: 18790350
Howell	NJ 07731-1451	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Association Receipt For:  Primary  General  Other (specify) ▼	Occupation VP Health Economics Aggregate Year-to-Date  240.00	
Full Name (Last, First, Middle Initial) Mr. Kevin J. Slavin, ESQ		Date of Receipt
Mailing Address 360 Lafayette Street		12 10 2010
City	State Zip Code	Transaction ID: 18790351
<u>Hackettstown</u>	NJ 07840-1919	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer East Orange General Hospital Receipt For:  Primary General Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) Ms. Cynthia A. Sorg		Date of Receipt
Mailing Address 33 Second Street		12 10 YYYY 12 10 2010
City	State Zip Code	Transaction ID: 18790352
<u>Hopewell</u>	NJ 08525-2014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Assistant to President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	
SUBTOTAL of Receipts This Page (optional)		520.00

TOTAL This Period (last page this line number only) ......

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 47 / 208 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan Mailing Address 283 Gallopiny Hill Ro  City Hopkinton  FEC ID number of contributing federal political committee.  Name of Employer New Hampshire Hospital Association Receipt For: Primary General	State Zip Code NH 03229-3402  C  Occupation V.P., Finance and Rural Hospitals  Aggregate Year-to-Date ▼	Date of Receipt    M M
Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen  Mailing Address 125 Airport Road  City  Concord  FEC ID number of contributing	270.00  State Zip Code NH 03301-7300	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
federal political committee.  Name of Employer New Hampshire Hospital Association Receipt For:  Primary General Other (specify) ▼	Occupation President and CEO  Aggregate Year-to-Date   750.01	83.33
Full Name (Last, First, Middle Initial) Ms. Sandra B Bruce Mailing Address 7435 West Talcott Av		Date of Receipt  1 2 0 7 2 0 1 0
City Chicago FEC ID number of contributing federal political committee.	State         Zip Code           IL         60631-3707	Transaction ID: 18790455  Amount of Each Receipt this Period  750.00
Name of Employer Resurrection Health Care  Receipt For:  Primary General  Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date  750.00	r ]
SUBTOTAL of Receipts This Page (optional) .		863.33

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 48 / 208 (check only one)    X   11a
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Alan H Channing Mailing Address 1401 S California Bou City Chicago FEC ID number of contributing federal political committee.	State Zip Code IL 60608-1858	Date of Receipt  1 2 0 7 2 0 1 0  Transaction ID: 18790457  Amount of Each Receipt this Period  500.00
Name of Employer Schwab Rehabilitation Hos- pital Receipt For:  Primary General Other (specify) ▼	Occupation President and Chief Executive Office  Aggregate Year-to-Date   500.00	per
Full Name (Last, First, Middle Initial) Dr. Ann Errichetti, , M.D.  Mailing Address 801 South Milwaukee	Avenue	Date of Receipt    M M
City	State Zip Code	Transaction ID: 18790470
<u>Libertyville</u>	IL 60048-3204	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate Condell Medical Center	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Colleen Kannaday, , FACHE		Date of Receipt
Mailing Address 12935 S. Gregory Stro	eet	1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18790473
Blue Island	IL 60406-2428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate BroMenn Regional Medical Cent Receipt For:	Occupation President  Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
	•	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 49 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial)  Ms. Susan Nordstrom Lopez		Date of Receipt
Mailing Address 836 West Wellington .  City	Avenue State Zip Code	1 2 0 7 2 0 1 0  Transaction ID: 18790477
Chicago	IL 60657-5147	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Advocate Illinois Masonic Medical Cent	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. William Montgomery	•	Date of Receipt
Mailing Address 1659 Ruth Place		12 07 2010
City	State Zip Code	Transaction ID: 18790479
Springfield	IL 62704-3361	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hospital Sisters Health System	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Robert G Senneff, , FACHE	1	Date of Receipt
Mailing Address 210 West Walnut Stre	eet	12 07 2010
City Princeton	State Zip Code IL 61520-2497	Transaction ID: 18790482  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Graham Hospital	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional) .		1250.00
TOTAL This Period (last page this line number	· ·	

CHEDULE A (FEC Form 3X EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 50 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
for commercial purposes, other than using	Statements may not be sold or used by any persible name and address of any political committee to	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Richard Walbert		Date of Receipt
Mailing Address P O Box 19456		12 07 2010
City Springfield	State Zip Code IL 62794-9456	Transaction ID: 18790485  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Hospital Sisters Health System	Occupation Vice President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Maryjane Wurth		Date of Receipt
Mailing Address 1151 East Warrenvi	lle Road	1 2 0 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18790487
<u>Naperville</u>	IL 60563-9339	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	500.00
Name of Employer Illinois Hospital Associa- tion	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Dr. Raymond V Ingham, , Ph.D.		Date of Receipt
Mailing Address 217 East Drive		1 2 0 8 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18790578
Lebanon	IN 46052-1221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Witham Health Services	Occupation President and CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SURTOTAL of Receipts This Page (optional)		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 51 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any person and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Michael J. Packnett		Date of Receipt
Mailing Address 10125 Silver Lake Ct.	014 7. O. I	12 08 2010
City Fort Wayne	State Zip Code IN 46825-7252	Transaction ID: 18790589  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 40023-7232	500.00
Name of Employer Parkview Health	Occupation President and Chief Executive Officer	_
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Pete Gallagher		Date of Receipt
Mailing Address Box 27184		12 13 / 2010
City	State Zip Code	Transaction ID: 18793061
Richmond	VA 23261-7184	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Bon Secours-Richmond Comm- unity Hospita	Occupation Chief Financial Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Dr. Donald Jansen, M.D.		Date of Receipt
Mailing Address 118 Jenny Court		1 2 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 18793062
Strasburg	VA 22657-3789	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Shenandoah Memorial Hospi- tal	Occupation Vice President, Medical Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
SUBTOTAL of Receipts This Page (optional)		1200.00
TOTAL This Period (last page this line number	<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 52 / 208 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Howard P Kern  Mailing Address 6015 Poplar Hall Driv  City Norfolk  FEC ID number of contributing federal political committee.	Ve  State Zip Code  VA 23502-3819  C	Date of Receipt  M M M / D D M 2 0 1 0  Transaction ID: 18793063  Amount of Each Receipt this Period  350.00
Name of Employer Sentara Healthcare  Receipt For:  Primary  Other (specify) ▼	Occupation President and Chief Operating Officer Aggregate Year-to-Date   350.00	,
Full Name (Last, First, Middle Initial) Mr. Jeffrey M Brannon Mailing Address 400 North Edwards S	Street	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18793066
Enterprise  FEC ID number of contributing federal political committee.	AL 36330-2510	Amount of Each Receipt this Period  1000.00
Name of Employer Medical Center Enterprise	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Mrs. Jennie R Rhinehart		Date of Receipt
Mailing Address 805 Friendship Road		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18793067
Tallassee  FEC ID number of contributing federal political committee.	AL 36078-1234	Amount of Each Receipt this Period 600.00
Name of Employer Community Hospital	Occupation Administrator and Chief Executive Of	fi
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
	1	

	HEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 53 / 208 (check only one)    X
or fo	rinformation copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>A.</b> !	Full Name (Last, First, Middle Initial) Mr. Jeffrey M Fried, , FACHE Mailing Address 424 Savannah Road City Lewes	State DE	Zip Code 19958-1462	Date of Receipt  1 2 1 3 2 0 1 0  Transaction ID: 18793068  Amount of Each Receipt this Period
- I f	FEC ID number of contributing ederal political committee.	C		500.00
_	Name of Employer Beebe Medical Center  Receipt For:  Primary General  Other (specify) ▼	Presiden	t and Chief Executive Office e Year-to-Date ▼ 500.00	<u>r</u> ]
<b>3.</b> _	Full Name (Last, First, Middle Initial) Mr. Ingo Angermeier, , FACHE Mailing Address 101 East Wood Street			Date of Receipt
(	Sity	State	Zip Code	Transaction ID: 18793069
- I	Spartanburg FEC ID number of contributing ederal political committee.	SC C	29303-3016	Amount of Each Receipt this Period 1000.00
<u> </u>	Name of Employer Spartanburg Regional Heal- thcare System Receipt For: Primary General Other (specify)	Occupation CEO Aggregate	e Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Mr. Mark Aycock			Date of Receipt
1	Mailing Address PO Box 1797			12 13 2010
(	City	State	Zip Code	Transaction ID: 18793070
ı	Spartanburg FEC ID number of contributing ederal political committee.	SC C	29304-1797	Amount of Each Receipt this Period 1000.00
	Name of Employer Spartanburg Regional Heal- thcare System	Occupation Senior V	P & CFO	
I	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
su	BTOTAL of Receipts This Page (optional)			2500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ζ)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports ar or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. James Bearden			Date of Receipt
Mailing Address 1127 Woodburn Ro	oad		12 13 2010
City	State	Zip Code	Transaction ID: 18793071
Spartanburg  FEC ID number of contributing federal political committee.	SC C	29302-3435	Amount of Each Receipt this Period  1000.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For:  Primary General Other (specify) ▼	<del> </del>	n cal Research Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Sheila Breitweiser Mailing Address 695 Fairwinds Road	d		Date of Receipt
City	State	Zip Code	Transaction ID: 18793072
Landrum	SC	29356-9077	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For:  Primary General  Other (specify) ▼	_ ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	exutive Director, Foundation  experto-Date  1000.00	]
Full Name (Last, First, Middle Initial) Mr. Dawn P. Corbin	<b>'</b>		Date of Receipt
Mailing Address 338 Labahr Ct.			1 2 1 3 2 0 1 0
City Boiling Springs	State SC	Zip Code	Transaction ID: 18793073
FEC ID number of contributing federal political committee.	C	29316-5941	Amount of Each Receipt this Period  1000.00
Name of Employer Spartanburg Régional Heal- thcare System Receipt For:	<del></del>	Medical Staff Services	
Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	1)		3000.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 55 / 208 (check only one)    X
or for con	mation copied from such Reports and St innercial purposes, other than using the OF COMMITTEE (In Full) rican Hospital Association PAC	atements ma name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full N Ms. St	ame (Last, First, Middle Initial) san Duggar g Address 487 N. Sweetwater Hills	o Dr		Date of Receipt
City	407 N. Sweetwater Filis	State	Zip Code	1 2 1 3 2 0 1 0 Transaction ID: 18793074
	e  D number of contributing I political committee.	SC C	29369-8605	Amount of Each Receipt this Period 1000.00
thcare Recei	of Employer anburg Regional Heal- e System of For: Primary General Other (specify)	Occupatio VP, Nurs Aggregate		
Mr. Ph	ame (Last, First, Middle Initial) il Feisal g Address 119 Mt. Vista Ave			Date of Receipt
City		State	Zip Code	Transaction ID: 18793075
	nville  D number of contributing I political committee.	SC	29605-1120	Amount of Each Receipt this Period 500.00
Name Allen	of Employer Bennett Hospital	Occupatio Presiden		
	ot For: Primary General Other (specify) ▼		e Year-to-Date ▼ 500.00	
				Date of Receipt
	g Address 487 N. Sweetwater Hills	s Dr.		12 13 2010
City		State	Zip Code	Transaction ID: 18793076
	e  D number of contributing I political committee.	SC C	29369-8605	Amount of Each Receipt this Period  1000.00
<u>thcare</u>	of Employer anburg Regional Heal- System		sident and Chief Medical Off	ic
	ot For: Primary General Other (specify) ♥	Aggregate	e Year-to-Date ▼ 1000.00	
SUBTO	IFAL of Receipts This Page (optional)			2500.00

	IEDULE A (FEC Form 3X) MIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 56 / 208 (check only one)    X
or for	formation copied from such Reports and St commercial purposes, other than using the ME OF COMMITTEE (In Full) merican Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<b>M</b> s	Il Name (Last, First, Middle Initial) . Judy Hamer illing Address 101 East Wood Street	State	Zip Code	Date of Receipt    M
	partanburg	SC	29303-3040	Amount of Each Receipt this Period
	C ID number of contributing leral political committee.	C		1000.00
<u>thc</u>	me of Employer lartanburg Regional Heal- lare System ceipt For: Primary General Other (specify)	Occupatio General Aggregate		
<b>B.</b> Ms	II Name (Last, First, Middle Initial)  Sara B. Hammond  illing Address 221 Huddersfield Drive			Date of Receipt
Cit	у	State	Zip Code	Transaction ID: 18793078
FE	mpsonville C ID number of contributing leral political committee.	SC	29681-3703	Amount of Each Receipt this Period 500.00
Na Sp tho Re	me of Employer artanburg Regional Heal- care System ceipt For: Primary General Other (specify)		Contracting e Year-to-Date  ▼  500.00	
	II Name (Last, First, Middle Initial) . Mary Jane Jennings			Date of Receipt
	illing Address 210 Springlake Road			1 2 1 3 2 0 1 0
Cit		State	Zip Code	Transaction ID: 18793079
FE	affney C ID number of contributing leral political committee.	SC C	29340-5662	Amount of Each Receipt this Period  1000.00
<u>thc</u>	me of Employer artanburg Regional Heal- care System		Medical Staff Services	
Re	ceipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
SUB	FOTAL of Receipts This Page (optional)			2500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 57 / 208 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persole name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Julian Josey Mailing Address PO Box 4126  City Spartanburg  FEC ID number of contributing federal political committee.  Name of Employer Spartanburg Regional Healthcare System Receipt For: Primary General	State Zip Code SC 29305-4126  C  Occupation President Spartanburg Radiology On Aggregate Year-to-Date ▼	Date of Receipt  1 2 1 3 2 0 1 0  Transaction ID: 18793080  Amount of Each Receipt this Period  500.00
Other (specify)  Full Name (Last, First, Middle Initial) Mr Randall G Nyp Mailing Address 101 East Wood Stree	500.00	Date of Receipt  M M M / D D / Y Y Y Y
City Spartanburg	State Zip Code SC 29303-3016	Transaction ID: 18793081  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Spartanburg Regional Heal- thcare System  Receipt For:  Primary  General  Other (specify) ▼	Occupation Senior Vice President and Chief Ope Aggregate Year-to-Date  1000.00	rat
Full Name (Last, First, Middle Initial) Mr. David Proctor		Date of Receipt
Mailing Address 238 Nelson Ave.		12 13 2010
City	State Zip Code SC 29302-2728	Transaction ID: 18793082
Spartanburg FEC ID number of contributing federal political committee.	C 29302-2128	Amount of Each Receipt this Period 500.00
Name of Employer Spartanburg Regional Heal- thcare System Receipt For:  Primary General Other (specify) ▼	Occupation Associate General Counsel  Aggregate Year-to-Date   500.00	
SURTOTAL of Receipts This Page (optional)		2000.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 58 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Ai	for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC		
· <u>/</u>	Full Name (Last, First, Middle Initial) Ms. Renee Romberger		Date of Receipt
	Mailing Address 5 Kinglet Court		12 13 2010
	City	State Zip Code	Transaction ID: 18793083
	Simpsonville FEC ID number of contributing	SC 29681-7221	Amount of Each Receipt this Period
	federal political committee.	C	1000.00
	Name of Employer Spartanburg Regional Heal-	Occupation Vice President	
	thcare System Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
	Full Name (Last, First, Middle Initial) Ms. Kathy Sinclair		Date of Receipt
	Mailing Address 226 N. Lake Emory D	)r	12 13 2010
	City	State Zip Code	Transaction ID: 18793084
	Inman	SC 29349-7256	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Spartanburg Regional Heal-	Occupation VP, Human Resources	
	thcare System Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	
	Full Name (Last, First, Middle Initial) Ms. Lori T. Winkles	I	Date of Receipt
	Mailing Address 144 Hawk Creek Driv	е	12 13 2010
	City	State Zip Code	Transaction ID: 18793085
	Spartanburg	SC 29301-1214	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Spartanburg Regional Heal- thcare System	Occupation Director of Rehab Wound Services	
	Receipt For: Primary General	Aggregate Year-to-Date ▼	٦
	Other (specify)	1000.00	_
	UDTOTAL of Descript This Description		3000.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 59 / 208 (check only one)    X   11a
A 0	ny information copied from such Reports and r for commercial purposes, other than using the	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Stephen A Williams		Date of Receipt
	Mailing Address P O Box 35070		12 13 2010
	City Louisville	State Zip Code KY 40232-5070	Transaction ID: 18793086  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	200.00
	Name of Employer Norton Healthcare	Occupation President	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	
	Full Name (Last, First, Middle Initial) Mr. Rex A Tungate		Date of Receipt
	Mailing Address 187 Wolford Avenue		12 13 2010
	City	State Zip Code	Transaction ID: 18793088
	Liberty	KY 42539-3278	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Casey County Hospital	Occupation Administrator	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. E Berton Whitaker, , FACHE		Date of Receipt
	Mailing Address 900 Hospital Drive		12 13 2010
	City	State Zip Code	Transaction ID: 18793092
	Madisonville	KY 42431-1644	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Regional Medical Center of Hopkins Cou	Occupation Chief Executive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	CURTOTAL of Possints This Page (antional)		950.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 60 / 208   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Greg Kiser			Date of Receipt
Mailing Address P O Box 769			M M / D D / Y Y Y Y Y Y 1 1 2 1 3 2 0 1 0
City Louisa	State KY	Zip Code 41230-0769	Transaction ID: 18793093  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	11200 0700	250.00
Name of Employer Three Rivers Medical Cent- er	Occupation Chief Exe	n ecutive Officer	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Joseph G Koch			Date of Receipt
Mailing Address 9 Linville Drive			1 2 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: 18793095
Paris  FEC ID number of contributing federal political committee.	C	40361-2129	Amount of Each Receipt this Period 250.00
Name of Employer Bourbon Community Hospital	Occupation Chief Exe	n ecutive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	]
Full Name (Last, First, Middle Initial) Mr. Mark Brenzel			Date of Receipt
Mailing Address 3503 Lakesied Ct			1 2 1 3 2 0 1 0
City Somerset	State KY	Zip Code 42503-9569	Transaction ID: 18793097  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	42000 0000	250.00
Name of Employer Lake Cumberland Regional Hospital	_, -	ecutive Officer	
Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	]
SUBTOTAL of Receipts This Page (optional			750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 61 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16
A or	ny information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
<u> </u>	Full Name (Last, First, Middle Initial) Mr. Michael T. Rust Mailing Address 937 Woodland Heights	e Drive		Date of Receipt
	City Louisville	State KY	Zip Code 40245-5219	Transaction ID: 18793098  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer Kentucky Hospital Association Receipt For:  Primary  General  Other (specify) ▼	_ '	n t and Chief Executive Officer e Year-to-Date ▼ 500.00	
	Full Name (Last, First, Middle Initial) Ms. Juanita Deskins Mailing Address 198 Cedar Hills Drive			Date of Receipt  1 2 1 3 2 0 1 0
	City	State	Zip Code	Transaction ID: 18793100
	Pikeville	KY	41501-8704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		250.00
	Name of Employer Pikeville Medical Center	Occupatio Assistant	n t Vice President	
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General  Other (specify) ▼		250.00	
	Full Name (Last, First, Middle Initial) Mr. David L Gray, , FACHE			Date of Receipt
	Mailing Address 913 North Dixie Avenu	е		12 13 2010
	City Elizabethtown	State KY	Zip Code 42701-2599	Transaction ID: 18793101
	FEC ID number of contributing federal political committee.	C	42701-2399	Amount of Each Receipt this Period 500.00
	Name of Employer Hardin Memorial Hospital	Occupatio Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	
<u>ر</u>	UBTOTAL of Receipts This Page (optional)			1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 62 / 208 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	d Statements may not be sold or used by any personal the name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Walter May Mailing Address Post Office Box 143  City	State Zip Code	Date of Receipt  1 2 1 3 2 0 1 0  Transaction ID: 18793110
Pikeville  FEC ID number of contributing federal political committee.	KY 41502-1439	Amount of Each Receipt this Period 500.00
Name of Employer Pikeville Medical Center  Receipt For:  Primary General  Other (specify) ▼	Occupation President & CEO  Aggregate Year-to-Date   500.00	
Full Name (Last, First, Middle Initial) Mr. John A Johnson Mailing Address 200 Abraham Flexn	er Way	Date of Receipt
City	State Zip Code	Transaction ID: 18793117
Louisville  FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period  250.00
Name of Employer Jewish Hospital & St. Mar- y's HealthCar Receipt For:  Primary General Other (specify) ▼	Occupation VP and General Counsel  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Mr. Bruce A Klockars, , FACHE Mailing Address P O Box 7		Date of Receipt  1 2 1 3 2 0 1 0
City Mount Starling	State Zip Code	Transaction ID: 18793120
Mount Sterling FEC ID number of contributing federal political committee.	KY 40353-0007	Amount of Each Receipt this Period  500.00
Name of Employer Saint Joseph Mount Sterli- ng Receipt For:  Primary General Other (specify) ▼	Occupation President  Aggregate Year-to-Date ▼  500.00	1
SUBTOTAL of Receipts This Page (optional	l)	1250.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	·)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions a solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Deborah K Molnar			Date of Receipt
Mailing Address 14225 Harbour Plac	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Prospect	State KY	Zip Code 40059-8004	Transaction ID: 18793121  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000 0001	250.00
Name of Employer Jewish Hospital & St. Mar- y's HealthCar Receipt For:	Occupatio Manager		
Primary General Other (specify) ▼	Aggregate	250.00	
Full Name (Last, First, Middle Initial) Mr Charles Black	<u> </u>		Date of Receipt
Mailing Address P O Box 1310			12 13 YYYYY
City	State	Zip Code	Transaction ID: 18793126
Mount Vernon	KY	40456-1310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Rockcastle Hospital and Respiratory Ca	Occupatio Chief Fin	n ancial Officer	
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼		500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen A Estes			Date of Receipt
Mailing Address P O Box 1310			12 13 2010
City	State	Zip Code	Transaction ID: 18793127
Mount Vernon	KY	40456-1310	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Rockcastle Hospital and Respiratory Ca		ecutive Officer	
Receipt For:    Primary   General	Aggregate	e Year-to-Date ▼	1
Other (specify) ▼	0 0	500.00	
			1250.00

	EDULE A (FEC Form 3X) IZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 64 / 208 (check only one)    X
or for co	ormation copied from such Reports and Stommercial purposes, other than using the ME OF COMMITTEE (In Full)	tatements may name and add	not be sold or used by any personers of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	erican Hospital Association PAC			
Mr C	Name (Last, First, Middle Initial) arl G Herde ing Address 4007 Kresge Way			Date of Receipt
City	4007 Reside Way	State	Zip Code	1 2 1 3 2 0 1 0 Transaction ID: 18793128
-	isville	KY	40207-4677	Amount of Each Receipt this Period
	ID number of contributing ral political committee.	C		250.00
Nam Bap	ne of Employer tist Healthcare System	Occupation Vice Presi	ident and Chief Financial C	Off
Rec	eipt For:	Aggregate '	Year-to-Date ▼ 250.00	
Mr	Name (Last, First, Middle Initial)  Tommy J Smith			Date of Receipt
Maili	ing Address 4007 Kresge Way			12 13 2010
City	S. 90.	State	Zip Code	Transaction ID: 18793138
FEC	isville ID number of contributing ral political committee.	C	40207-4677	Amount of Each Receipt this Period 500.00
Nam Bap	ne of Employer tist Healthcare System	Occupation President	and Chief Executive Office	er
Rec	eipt For: Primary General Other (specify) ▼	Aggregate '	Year-to-Date ▼ 500.00	
	Name (Last, First, Middle Initial) Chip Peal			Date of Receipt
Maili 	ing Address 299 King's Daughters [	Drive		12 / 13 / 2010
City	nkfort	State KY	Zip Code	Transaction ID: 18793144
FEC	ID number of contributing ral political committee.	C	40601-6514	Amount of Each Receipt this Period 500.00
Nam Frar <u>Cen</u>	ne of Employer nkfort Regional Medical ter	Occupation Chief Exe	cutive Officer	
Rec	eipt For: Primary General Other (specify)	Aggregate '	Year-to-Date ▼ 500.00	
		<u> </u>		1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate sch for each category Detailed Summar	of the
A	for commercial purposes, other than using the	tatements may not be sold or used name and address of any political	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
<u>,                                     </u>	Full Name (Last, First, Middle Initial) Mrs. Susan Stout Tamme, , FACHE		Date of Receipt
	Mailing Address 4000 Kresge Way		12 13 2010
	City	State Zip Code	Transaction ID: 18793145
	Louisville	KY 40207-4605	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Baptist Hospital East	Occupation President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00
_	Full Name (Last, First, Middle Initial) Mr. Thomas Gessel		Date of Receipt
	Mailing Address 1850 Bluegrass Avenu	е	12 13 / Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: 18793146
	Louisville	KY 40215-1199	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	500.00
	Name of Employer Sts. Mary & Elizabeth Hos- pital	Occupation Chief Executive Officer	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00
	Full Name (Last, First, Middle Initial) Ms. Karen Profitt Newman		Date of Receipt
	Mailing Address 4000 Kresge Way		12 13 2010
	City	State Zip Code	Transaction ID: 18793147
	Louisville	KY 40207-4676	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	500.00
	Name of Employer Baptist Hospital East	Occupation Vice President	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼		500.00
Г			1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 66 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personante and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. James W. Taylor  Mailing Address 803 Poplar Street  City Murray  FEC ID number of contributing federal political committee.  Name of Employer Murray-Calloway County Hospital Receipt For: Primary General Other (specify)	State Zip Code KY 42071-2467  C  Occupation Vice President of Professional Srvc  Aggregate Year-to-Date   500.00	Date of Receipt  12 13 2010  Transaction ID: 18793148  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. James D. Jackson  Mailing Address Post Office Box 668  City Prestonsburg  FEC ID number of contributing federal political committee.  Name of Employer Highlands Regional Medical Center Receipt For: Primary General Other (specify)	State Zip Code KY 41653-0668  C  Occupation Chief Information Officer  Aggregate Year-to-Date  250.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr. Jack G. Blackwell  Mailing Address 2201 Forest Ave  City Ashland  FEC ID number of contributing federal political committee.  Name of Employer Highlands Regional Medical Center  Receipt For: Primary General Other (specify)	State Zip Code KY 41101  C  Occupation Chief Financial Officer  Aggregate Year-to-Date ▼  500.00	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 67 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persename and address of any political committee t	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Bill Kindred Mailing Address 111 Old Glasgow Roa  City Edmonton  FEC ID number of contributing federal political committee.  Name of Employer T. J. Samson Community Hospital Receipt For: Primary General	d  State Zip Code KY 42129-9050  C  Occupation Chief Executive Officer  Aggregate Year-to-Date ▼	Date of Receipt    M   M   D   D   2 0 1 0
Full Name (Last, First, Middle Initial) Mr. Edward Nairn Mailing Address Highlands Regional M Box 668 City Prestonburg FEC ID number of contributing federal political committee.  Name of Employer Highlands Regional Medical	ed Ctr  State Zip Code KY 41653-0668  C  Occupation	Date of Receipt    M M M
Center Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Vicki A Darnell  Mailing Address 217 South Third Stree	Board Member  Aggregate Year-to-Date ▼  250.00	Date of Receipt
City  Danville  FEC ID number of contributing federal political committee.	State Zip Code KY 40422-1823	1 2 1 3 2 0 1 0  Transaction ID: 18793163  Amount of Each Receipt this Period  250.00
Name of Employer Ephraim McDowell Regional Medical Cent Receipt For:  Primary  General  Other (specify) ▼	Occupation President and Chief Executive Office Aggregate Year-to-Date ▼  250.00	er
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 68 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Terry Peeples, , FACHE Mailing Address P O Box 2400  City Hopkinsville  FEC ID number of contributing federal political committee.  Name of Employer Jennie Stuart Medical Center  Receipt For: Primary General Other (specify)	State Zip Code KY 42241-2400  C  Occupation Chief Executive Officer  Aggregate Year-to-Date   500.00	Date of Receipt  1 2 1 3 2 0 1 0  Transaction ID: 18793164  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr Michael W Gough Mailing Address P O Box 35070  City Louisville  FEC ID number of contributing federal political committee.  Name of Employer Norton Healthcare  Receipt For: Primary General Other (specify)	State Zip Code KY 40232-5070  C  Occupation Chief Financial Officer  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 1 0  Transaction ID: 18793165  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. John D Harryman Mailing Address 4001 Dutchmans Lar City Louisville FEC ID number of contributing federal political committee.  Name of Employer Norton Suburban Hospital  Receipt For: Primary General Other (specify)	State Zip Code KY 40207-4799  C  Occupation President  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)  TOTAL This Period (last page this line number		1250.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 69 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	, , , , , , , , , , , , , , , , , , ,	
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Thomas D Kmetz		Date of Receipt
Mailing Address 9820 Third Street Ro	ad	12 13 YYYY 12 13 2010
City	State Zip Code	Transaction ID: 18793167
Louisville	KY 40272-2802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Norton Southwest Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Mr. Steven MacLauchlan		Date of Receipt
Mailing Address P O Box 17550		12 13 2010
City	State Zip Code	Transaction ID: 18793168
Louisville	KY 40217-0550	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Norton Audubon Hospital	Occupation President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr Robert Shaw		Date of Receipt
Mailing Address 19 Hill River Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18793169
Louisville	KY 40207-1191	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Norton Healthcare	Occupation President Cancer Institute	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
		1250.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 70 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
A 0	ny information copied from such Reports and for commercial purposes, other than using the	Statements may not be sold or used by any pe e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Kevin S Wardell		Date of Receipt
	Mailing Address P O Box 35070		12 13 7 2010
	City Louisville	State Zip Code KY 40232-5070	Transaction ID: 18793171
	FEC ID number of contributing federal political committee.	C 40232-5070	Amount of Each Receipt this Period 250.00
	Name of Employer Norton Hospital	Occupation President	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
-	Full Name (Last, First, Middle Initial) Ms. Tracy E Williams	04- 005	Date of Receipt
	Mailing Address 234 East Gray Street	12 13 2010	
	City	State Zip Code	Transaction ID: 18793172
	Louisville	KY 40202-1913	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Norton Healthcare	Occupation Senior Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_	Full Name (Last, First, Middle Initial) Mr. Douglas A. Winkelhake		Date of Receipt
	Mailing Address 8911 Duxburry Road		12 13 YYYYY 12 13 2010
	City	State Zip Code	Transaction ID: 18793173
	Louisville	KY 40242-6910	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer Norton Suburban Hospital	Occupation Chief Operating Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	NIDTOTAL (Describe This Described)		750.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 71 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16
any information copied from such Reports and r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Russell F. Cox Mailing Address 443 Lightfoot Road		Date of Receipt
Mailing Address 443 Lightfoot Road  City	State Zip Code	12 13 2010
Louisville	KY 40207-1853	Transaction ID: 18793176  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Norton Healthcare	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Stephen A Williams		Date of Receipt
Mailing Address P O Box 35070		12 13 2010
City	State Zip Code	Transaction ID: 18793177
Louisville  FEC ID number of contributing federal political committee.	KY 40232-5070	Amount of Each Receipt this Period 500.00
Name of Employer Norton Healthcare	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
Full Name (Last, First, Middle Initial) Mr. Stephen M. Johnson		Date of Receipt
Mailing Address PO Box 20007		1 2 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 18793180
Owensboro FEC ID number of contributing federal political committee.	KY 42304-0007	Amount of Each Receipt this Period 250.00
Name of Employer Owensboro Medical Health System Receipt For: Primary General	Occupation Dir. Government & Community Rela Aggregate Year-to-Date ▼  250.00	tions
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (optional)		1250.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 72 / 208 (check only one)    X
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any person g the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mrs. Nina W Eisner  Mailing Address 3050 Rio Dosa Dri	ve	Date of Receipt  1 2 1 3 2 0 1 0
City Lexington	State         Zip Code           KY         40509-9990	Transaction ID: 18793181  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer	Occupation	500.00
Name of Employer Ridge Behavioral Health System Receipt For:  Primary  General  Other (specify) ▼	Chief Executive Officer and Managing  Aggregate Year-to-Date ▼  500.00	<b>D</b>
Full Name (Last, First, Middle Initial) Mr. Patrick Donahue Mailing Address 4604 Highway 60 \	West	Date of Receipt  1 2 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 18793182
Morganfield	KY 42437-9570	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Methodist Hospital Union County	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Jean Yates		Date of Receipt
Mailing Address 1035 Porter Pike F	Road	12 13 2010
City	State Zip Code	Transaction ID: 18793186
Bowling Green  FEC ID number of contributing federal political committee.	KY 42103-7200	Amount of Each Receipt this Period  250.00
Name of Employer Highlands Regional Medical Center	Occupation VP, Patient Care Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SURTOTAL of Receipts This Page (ention	al)	1250.00

Any information copied from such For for commercial purposes, other to NAME OF COMMITTEE (In Full American Hospital Associal Full Name (Last, First, Middle In Mr. H. Daniel Stafford Mailing Address 4892 Hunt Apt. 401	ition PAC	erson for the purpose of soliciting contributions ee to solicit contributions from such committee.  Date of Receipt
American Hospital Associa  Full Name (Last, First, Middle In Mr. H. Daniel Stafford  Mailing Address 4892 Hunt	ition PAC	Date of Receipt
Mr. H. Daniel Stafford  Mailing Address 4892 Hunt		Date of Receipt
0 .002	Rd	
·		12 13 2010
City Blue Ash	State Zip Code OH 45242-6964	Transaction ID: 18793432  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Christ Hospital	Occupation Compliance Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle In Mr. Mark Loos	itial)	Date of Receipt
Mailing Address 111 Fox Tr		12 13 2010
City	State Zip Code	Transaction ID: 18793518
Chargin Falls  FEC ID number of contributing federal political committee.	OH 44022	Amount of Each Receipt this Period 250.00
Name of Employer University Hospitals	Occupation Chief Medical/Surgical Svcs Office	er
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle In Mr. John E. Callender	itial)	Date of Receipt
Mailing Address 2743 Elginf	ield Road	12 13 2010
City	State Zip Code	Transaction ID: 18793526
Upper Arlington  FEC ID number of contributing federal political committee.	OH 43220-4247	Amount of Each Receipt this Period  350.00
Name of Employer Ohio Hospital Association	Occupation Senior Vice President & CFO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	
SUBTOTAL of Receipts This Pag	e (optional)	850.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 74 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
,	Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any persidress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
۷.	Full Name (Last, First, Middle Initial) Dr. David Engler, PhD			Date of Receipt
	Mailing Address 323 Pebble Creek Driv			12 13 2010
	City Dublin	State OH	Zip Code 43017-1370	Transaction ID: 18793527
	FEC ID number of contributing federal political committee.	C	43017-1370	Amount of Each Receipt this Period 500.00
	Name of Employer Ohio Hospital Association	Occupation VP, Qual	n lity Institute	
	Receipt For:  Primary General  Other (specify)	Aggregate	e Year-to-Date ▼ 750.00	
В.	Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley	1		Date of Receipt
	Mailing Address 257 Clouse Lane			12 13 2010
	City	State	Zip Code	Transaction ID: 18793528
	Granville	OH	43023-1428	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		650.00
	Name of Employer Ohio Hospital Association	Occupation Senior Vi	<sup>n</sup> ice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1300.00	
_ C.	Full Name (Last, First, Middle Initial) Ms. Mary L. Gallagher			Date of Receipt
	Mailing Address 155 East Broad Street 15th Floor	.,		12 13 YYYY 12 13
	Columbus	State	Zip Code	Transaction ID: 18793529
	Columbus  FEC ID number of contributing federal political committee.	OH C	43215-3609	Amount of Each Receipt this Period 262.50
	Name of Employer Ohio Hospital Association	Occupation Vice Pres	n sident & General Counsel	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 525.00	
	SUBTOTAL of Receipts This Page (optional)			1412.50
	TOTAL This Period (last page this line number			

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 75 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and	, , ,	13 14 15 16
or for commercial purposes, other than using	d Statements may not be sold or used by any person the name and address of any political committee to s	solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Bridget A. Gargan		Date of Receipt
Mailing Address 54 West Weisheime		12 13 2010
City	State Zip Code	Transaction ID: 18793530
Columbus	OH 43214-2545	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	275.00
Name of Employer Ohio Hospital Association	Occupation Vice President, State Policy & Advoca	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	650.00	
Full Name (Last, First, Middle Initial) Ms. Kimberly A. Keiser	1	Date of Receipt
Mailing Address 2237 Bryden Road		12 13 YYYY 12 13 2010
City	State Zip Code	Transaction ID: 18793531
Bexley	OH 43209-1612	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Ohio Hospital Association	Occupation Chief Information Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	
Full Name (Last, First, Middle Initial) Ms. Mary M. Yost		Date of Receipt
Mailing Address 924 Riva Ridge Bou	levard	12 13 YYYY 12 13 2010
City	State Zip Code	Transaction ID: 18793536
Gahanna	OH 43230-3825	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	262.50
Name of Employer Ohio Hospital Association	Occupation Vice President, Public Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	525.00	
	)	787.50

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. James R. Castle			Date of Receipt
Mailing Address 815 Gatehouse Lane			12 13 2010
City	State	Zip Code	Transaction ID: 18793538
Columbus	OH	43235-1733	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		550.00
Name of Employer Ohio Hospital Association	Occupatio Presiden	n t & Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1100.00	
Full Name (Last, First, Middle Initial) Mr. Joseph R. Ruggles			Date of Receipt
Mailing Address 1780 Buck Creek Lan	ie		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18793540
<u>Springfield</u>	OH	45502-8800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		300.00
Name of Employer Ohio Hospital Association	Occupatio Vice Pres	n sident, Member Developmer	nt
Receipt For:	Aggregate	e Year-to-Date ▼	
Primary General Other (specify) ▼	0 0	600.00	
Full Name (Last, First, Middle Initial) Mr. Rick Sites			Date of Receipt
Mailing Address 1312 Smalwood Drive	9		1 2 1 3 2 0 1 0
City	State	Zip Code	Transaction ID: 18793557
Columbus	OH	43235-2503	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		175.00
Name of Employer Ohio Hospital Association	Occupation Staff Leg	n jal Counsel	
Receipt For:	Aggregate	e Year-to-Date ▼	_
Primary General Other (specify) ▼		350.00	]
	1		1025.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 77 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Stanley R Korducki Mailing Address 950 West Wooster Str  City Bowling Green FEC ID number of contributing	State         Zip Code           OH         43402-2603	Date of Receipt    M M
federal political committee.  Name of Employer Wood County Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation President  Aggregate Year-to-Date   1000.00	300.00
Full Name (Last, First, Middle Initial) Ms. Mina H Ubbing Mailing Address 401 North Ewing Stree		Date of Receipt    M
City	State Zip Code OH 43130-3372	Transaction ID: 18793574
Lancaster  FEC ID number of contributing federal political committee.  Name of Employer	OH 43130-3372  C Occupation	Amount of Each Receipt this Period  250.00
Fairfield Medical Center  Receipt For: Primary General Other (specify)	President and Chief Executive Office  Aggregate Year-to-Date ▼  500.00	<u>r                                    </u>
Full Name (Last, First, Middle Initial) Mr. Fred M DeGrandis		Date of Receipt
Mailing Address 18101 Lorain Avenue		1 2 1 3 2 0 1 0
City	State Zip Code	Transaction ID: 18793575
Cleveland FEC ID number of contributing federal political committee.	OH 44111-5612	Amount of Each Receipt this Period 500.00
Name of Employer Cleveland Clinic Health System Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Chair, Community Physician Partner Aggregate Year-to-Date  1000.00	ship
		1250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 78 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	statements may not be sold or used by any person e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Claus von Zychlin  Mailing Address 793 West State Street  City  Columbus  FEC ID number of contributing federal political committee.  Name of Employer Mount Carmel  Receipt For:  Primary General  Other (specify)	State Zip Code OH 43222-1551  C  Occupation President and Chief Executive Officer  Aggregate Year-to-Date  1000.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Dr. James M Sudimack, MD  Mailing Address 2774 Timber Creek Dr  City Cortland  FEC ID number of contributing federal political committee.  Name of Employer Ohio Hospital Association  Receipt For: Primary General Other (specify)	State Zip Code OH 44410-1756  C  Occupation Trustee  Aggregate Year-to-Date   1000.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Patrick J Martin Mailing Address 272 Benedict Avenue  City Norwalk  FEC ID number of contributing federal political committee.  Name of Employer Fisher-Titus Medical Center Receipt For: Primary General Other (specify)	State Zip Code OH 44857-2374  C  Occupation President and Chief Executive Officer Aggregate Year-to-Date  550.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	1250.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 79 / 208 (check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may nee name and addre	ot be sold or used by any persons of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Michael R Stephens			Date of Receipt
Mailing Address 4000 Miamisburg-Cel			12 / 13 / 2010
City Miamisburg	State OH	Zip Code 45342-7615	Transaction ID: 18793580  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		125.00
Name of Employer Sycamore Medical Center	Occupation President		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Ms. Susan Croushore			Date of Receipt
Mailing Address 2139 Auburn Avenue			12 13 2010
City Cincinnati	State OH	Zip Code	Transaction ID: 18793581
FEC ID number of contributing federal political committee.	C	45219-2906	Amount of Each Receipt this Period 250.00
Name of Employer Christ Hospital	Occupation President a	and Chief Executive Office	r
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Steven Allen			Date of Receipt
Mailing Address 4040 Baughman Grai	nt		1 2 1 3 2 0 1 0
City New Albany	State OH	Zip Code 43054-8933	Transaction ID: 18793582  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1 1 1 1	125.00
Name of Employer Nationwide Children's Hos- pital		utive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional)			500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 80 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Melvin H. Fahs  Mailing Address 324 West Arghur Stree  City  Hicksville  FEC ID number of contributing federal political committee.  Name of Employer Community Memorial Hospital  Receipt For:  Primary General  Other (specify)	State Zip Code OH 43526-1026  C  Occupation President & CEO  Aggregate Year-to-Date   400.00	Date of Receipt  12 13 2010  Transaction ID: 18793584  Amount of Each Receipt this Period  200.00
Full Name (Last, First, Middle Initial) Mr. Edward J Roth, III  Mailing Address 2600 Sixth Street SW  City Canton  FEC ID number of contributing federal political committee.  Name of Employer Aultman Hospital  Receipt For: Primary General Other (specify)	State Zip Code OH 44710-1702  C  Occupation President and Chief Executive Office Aggregate Year-to-Date  750.00	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Steven Garlock  Mailing Address 438 Crossings Dr  City Westerville  FEC ID number of contributing federal political committee.  Name of Employer Grady Memorial Hospital  Receipt For: Primary General Other (specify)	State Zip Code OH 43082-6339  C  Occupation President  Aggregate Year-to-Date ▼  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 1 0  Transaction ID: 18793591  Amount of Each Receipt this Period  125.00
SUBTOTAL of Receipts This Page (optional)		700.00

	OULE A (FEC Form 3X) ED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 81 / 208 (check only one)  X 11a 11b 11c 12
Any inform	nation copied from such Reports and S mercial purposes, other than using the	Statements may e name and add	not be sold or used by any persodress of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
1 \	OF COMMITTEE (In Full) ican Hospital Association PAC			
	nme (Last, First, Middle Initial) on S Prout			Date of Receipt
	Address 375 Dixmyth Avenue			12 13 2010
City		State	Zip Code	Transaction ID: 18793592
<u>Cincir</u>	nnati	OH	45220-2475	Amount of Each Receipt this Period
	number of contributing political committee.	C		350.00
Name Good S	of Employer Samaritan Hospital	Occupation President	n t and Chief Executive Office	_ r
Receip	t For: Primary General	Aggregate	Year-to-Date ▼	
	Other (specify)		700.00	
	ume (Last, First, Middle Initial) ott C Malaney			Date of Receipt
Mailing	Address 1900 South Main Stree	et		1 2 1 3 2 0 1 0
City		State	Zip Code	Transaction ID: 18793593
<u>Findla</u>	цу	OH	45840-1214	Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Name Blanch Systen	of Employer ard Valley Health n	Occupation Presiden	n t and Chief Executive Office	r
Receip		Aggregate	Year-to-Date <b>V</b>	
	Primary General Other (specify) ♥		1000.00	
	ume (Last, First, Middle Initial) omas F Zenty, III			Date of Receipt
	Address 11100 Euclid Avenue			1 2 1 3 2 0 1 0
City		State	Zip Code	Transaction ID: 18793594
Cleve	land	OH	44106-1716	Amount of Each Receipt this Period
	number of contributing political committee.	C		500.00
Name Univer	of Employer sity Hospitals	Occupation Chief Exe	n ecutive Officer	
Receip		Aggregate	Year-to-Date <b>V</b>	
	Primary General  Other (specify) ▼		1000.00	]
	AL of Receipts This Page (optional)	<u> </u>		1350.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 82 / 208 (check only one)    X
,	any information copied from such Reports and S or for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. David Cook			Date of Receipt
	Mailing Address 19056 Quail Hollow D	rive		12 / 13 / 2010
	City Strongsville	State OH	Zip Code	Transaction ID: 18793595
	FEC ID number of contributing federal political committee.	C	44136-6441	Amount of Each Receipt this Period 500.00
	Name of Employer University Hospital	Occupation Vice Pres	ident and CFO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
- 3.	Full Name (Last, First, Middle Initial) Dr. Fred C Rothstein, , M.D.	1		Date of Receipt
	Mailing Address 1080 W Hill Drive			12 13 2010
	City	State	Zip Code	Transaction ID: 18793602
	Gates Mills  FEC ID number of contributing federal political committee.	OH	44040-9627	Amount of Each Receipt this Period 500.00
	Name of Employer University Hospitals Case Medical Cent	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
	Full Name (Last, First, Middle Initial) Mr. Richard Hanson			Date of Receipt
	Mailing Address 12340 Bass Lake Roa	ıd		12 13 YYYY 12 13 2010
	City	State	Zip Code	Transaction ID: 18793603
	Chardon	OH	44024-8327	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		500.00
	Name of Employer University Hospitals Exte- nded Care Cam	Occupation President		
	Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 1000.00	
				1500.00

Full Name of Mailing of City Cincing FEC ID federal p	nercial purposes, other than using the DF COMMITTEE (In Full) Ivan Hospital Association PAC Ine (Last, First, Middle Initial) Ivalice Annecharico Address 234 Goodman Street	State Zip COH 4521	ny political committee to	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
A. Full Nan Ms. Man Mailing A  City Cincing FEC ID federal p	nan Hospital Association PAC ne (Last, First, Middle Initial) v Alice Annecharico Address 234 Goodman Street nati number of contributing political committee.	OH 4521		1 2 1 3 2 0 1 0 Transaction ID: 18793604
Ms. Mary Mailing A  City Cincing FEC ID federal p	Address 234 Goodman Street  nati number of contributing political committee.	OH 4521		1 2 1 3 2 0 1 0 Transaction ID: 18793604
City Cincini FEC ID federal p	nati number of contributing political committee.	OH 4521		1 2 1 3 2 0 1 0 Transaction ID: 18793604
Cincing FEC ID federal p	number of contributing olitical committee.	OH 4521		
FEC ID federal p	number of contributing olitical committee.			
	Employer ty Hospital	10		500.00
Name of Universi		Occupation Sr. Vice President	t and Chief Informat	— ti
	For: imary General her (specify) <b>▼</b>	Aggregate Year-to-D	1000.00	
Mr. Paul		l		Date of Receipt
Mailing /	Address 6560 Thorntree Drive			12 13 2010
City		State Zip C		Transaction ID: 18793605
Brecks		OH 4414	1-1769	Amount of Each Receipt this Period
federal p	number of contributing olitical committee.	C		500.00
Name of Universi	Employer ty Hospitals	Occupation Sr VP, Strategic F	Planning & Bus Deve	el <b>o</b>
Receipt		Aggregate Year-to-D	ate 🔻	
	imary General her (specify) ▼		1000.00	
	ne (Last, First, Middle Initial) ael A. Szubski			Date of Receipt
Mailing /	Address 11100 Euclid Avenue			12 13 2010
City		State Zip C		Transaction ID: 18793606
	and number of contributing solitical committee.	OH 4410	6-1716	Amount of Each Receipt this Period 500.00
Name of	Employer ty Hospitals Rich-	Occupation Chief Financial Of	fficer	
Receipt Pr		Aggregate Year-to-D		
SURTOTA	L of Receipts This Page (optional)	<u> </u>		1500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 84 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Keith E. Maitland Mailing Address 31415 Tuttle Drive City	State Zip Code	Date of Receipt  1 2
Bay Village	OH 44140-1515	Transaction ID: 18793607
FEC ID number of contributing federal political committee.	C 44140-1313	Amount of Each Receipt this Period 500.00
Name of Employer University Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation President, UH Home Care  Aggregate Year-to-Date   1000.00	
Full Name (Last, First, Middle Initial) Mr. Thomas R Mullen Mailing Address 301 St Paul Place		Date of Receipt  1 2 1 4 2 0 1 0
City	State Zip Code	Transaction ID: 18793626
Baltimore	MD 21202-2102	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	204.00
Name of Employer Mercy Medical Center	Occupation President and Chief Executive Office	r
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 289.00	
Full Name (Last, First, Middle Initial) Mr. Wayne A. Smith		Date of Receipt
Mailing Address 1280 South Governo	rs Avenue	12 / 15 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18793662
Dover	DE 19904-4802	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	240.00
Name of Employer Delaware Healthcare Assoc- iation	Occupation President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 740.00	
		944.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 85 / 208 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mr. Joseph A. Carr  Mailing Address 2378 Orchard Crest B	ilvd.	Date of Receipt    M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
City	State Zip Code	Transaction ID: 18794492
Manasquan  FEC ID number of contributing federal political committee.	NJ 08736-4001	Amount of Each Receipt this Period 240.00
Name of Employer New Jersey Hospital Association Receipt For:  Primary General Other (specify) ▼	Occupation Chief Information Officer  Aggregate Year-to-Date   480.00	
Full Name (Last, First, Middle Initial) Mr. John J. Dawidowski Mailing Address 17 Brookshire Drive		Date of Receipt  1 2 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 18794496
Robbinsville	NJ 08691-2554	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President & General Manager	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein		Date of Receipt
Mailing Address 27 Harvest Lane		12 17 2010
City	State Zip Code	Transaction ID: 18794502
Livingston	NJ 07039-2750	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	20.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President Continuing Care Serv	rice
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	
		510.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 86 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	statements may not be sold or used by any persename and address of any political committee to	on for the purpose of soliciting contributions of solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. John E. Graydon Mailing Address 93 Matlack Drive  City Voorhees  FEC ID number of contributing federal political committee.  Name of Employer Virtua Health  Receipt For: Primary General Other (specify)	State Zip Code NJ 08043-4723  C  Occupation Vice President, Managed Care Aggregate Year-to-Date  500.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain City		Date of Receipt    M
New Hope  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association  Receipt For:  Primary General Other (specify)	Occupation Sr. VP., Health Economics  Aggregate Year-to-Date  725.01	Amount of Each Receipt this Period 40.83
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.  Mailing Address 4 Poppy Lane  City  Howell  FEC ID number of contributing federal political committee.	State Zip Code NJ 07731-1451	Date of Receipt    M
Name of Employer New Jersey Hospital Association Receipt For:  Primary  General  Other (specify) ▼	Occupation VP Health Economics  Aggregate Year-to-Date   480.00	
SUBTOTAL of Receipts This Page (optional)		780.83

Any information copied from such Reports and		X   11a   11b   11c   12   13   14   15   16   1
NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any perso he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. William Hibbitt		Date of Receipt
Mailing Address 2800 North Dallas Pa Suite 200	•	12 15 2010
City <u>Plano</u>	State Zip Code TX 75093-5994	Transaction ID: 18794871  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer LHP Hospital Group	Occupation Exec. VP & Deputy CFO	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Ms. Jo Lynn Wallace Mailing Address 3001 Eldorado Drive		Date of Receipt
		12 15 2010
City Medford	State Zip Code OR 97504-8136	Transaction ID: 18794979  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Asante Health System	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. William E Winter		Date of Receipt
Mailing Address 342 Fairview Street		12 15 2010
City	State Zip Code OR 97381-1917	Transaction ID: 18794983
Silverton  FEC ID number of contributing federal political committee.	OR 97381-1917	Amount of Each Receipt this Period  500.00
Name of Employer Silverton Hospital	Occupation Administrative Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optional)		1750.00

SCHEDULE A (FEC		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 88 / 208 (check only one)    X   11a
Any information copied from s or for commercial purposes, o	uch Reports and Statements ma ther than using the name and ac	ay not be sold or used by any pers ddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE ( American Hospital Ass	•		
Full Name (Last, First, Mid Mr. Alan R Yordy	dle Initial)		Date of Receipt
	SE Eastgate Way, Ste 300		12 15 2010
City Bellevue	State WA	Zip Code 98007-6493	Transaction ID: 18794984
FEC ID number of contributed rederal political committee.		30007-0433	Amount of Each Receipt this Period 500.00
Name of Employer PeaceHealth	Occupation Presider	on nt and Chief Mission Officer	
Receipt For:  Primary Ge  Other (specify) ▼	Aggregat	e Year-to-Date ▼ 1000.00	
Full Name (Last, First, Mid Ms. Robin Moody	dle Initial)		Date of Receipt
Buildin	ruse Way Place g 2, Suite 100		12 15 2010
City Lake Oswego	State OR	Zip Code	Transaction ID: 18794988
FEC ID number of contributed federal political committee.		97035-5545	Amount of Each Receipt this Period  34.50
Name of Employer Oregon Association of Hos pitals & Heal	Occupation Director	on of Public Policy	
Receipt For:  Primary Ge  Other (specify) ▼	neral Aggregat	e Year-to-Date ▼ 500.50	
Full Name (Last, First, Mid Mr. Peter F Rapp	dle Initial)		Date of Receipt
Mailing Address 3181 S	W Sam Jackson Park Roa	d	12 15 2010
City	State	Zip Code	Transaction ID: 18794989
Portland  FEC ID number of contributed federal political committee.	oR ting C	97239-3011	Amount of Each Receipt this Period 500.00
Name of Employer OHSU Hospital	Occupation Vice Pre	on esident and Executive Directo	or
Receipt For:  Primary Ge  Other (specify) ▼		e Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This	Page (optional)		1034.50
	e this line number only)	<u> </u>	

SCHEDULE A (FI	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 89 / 208 (check only one)    X
Any information copied from or for commercial purposes	n such Reports and Statements man, other than using the name and a	nay not be sold or used by any persaddress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTER American Hospital A	'		
Full Name (Last, First, N Ms. Peggy Allen	∕liddle Initial)		Date of Receipt
Mailing Address 1883	39 Roundtree		12 15 2010
City	State	Zip Code	Transaction ID: 18795003
Oregon City	OR	97045-3920	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			85.50
Name of Employer Oregon Association of H	Hos- Occupat		
pitals & Heal Receipt For:	Directo	or of Finance	_
	General	ate Year-to-Date ▼ 385.50	
Full Name (Last, First, N	/liddle Initial)		Date of Receipt
Mailing Address 2123	Ridgebrook Drive		1 2 1 5 2 0 1 0
City	State	Zip Code	Transaction ID: 18795006
West Linn	OR	97068-1943	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			400.00
Name of Employer Oregon Association of F pitals & Heal	Hos- Occupat	tion ent & CEO	
Receipt For:	General	ate Year-to-Date ▼ 935.00	
Full Name (Last, First, M Mr. Andy Van Pelt	/liddle Initial)		Date of Receipt
	) Kruse Way Place Jing 2, Suite 100		12 15 2010
City	State	Zip Code	Transaction ID: 18795007
Lake Oswego	OR	97035-5545	Amount of Each Receipt this Period
FEC ID number of contr federal political committee			40.00
Name of Employer Oregon Association of F pitals & Heal	Hos- Occupat Directo	tion or of Communications	
Receipt For:		ate Year-to-Date ▼	_
Other (specify)	General	302.50	

TOTAL This Period (last page this line number only) .....

	JLE A (FEC Form 3X) D RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 90 / 208 (check only one)    X
or for comme	ion copied from such Reports and Stercial purposes, other than using the COMMITTEE (In Full) an Hospital Association PAC	tatements may name and add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. Denni Mailing A	ddress 610 NW 11th Street	State OR	Zip Code	Date of Receipt    M
	umber of contributing litical committee.	C	97838-6601	Amount of Each Receipt this Period 250.00
System Receipt F Prir	Employer epherd Healthcare or: nary General er (specify)	Occupation Presiden Aggregate		
Dr. Georg	e (Last, First, Middle Initial) e Cioffi, MD. ddress 3639 NW Thurman			Date of Receipt
City		State	Zip Code	Transaction ID: 18795019
	dumber of contributing lilitical committee.	OR	97210-1232	Amount of Each Receipt this Period
Name of Legacy H	Employer ealth System	Occupation Chief of 0	n Opthalmology	
	or: nary General er (specify) ▼	<u> </u>	e Year-to-Date ▼ 300.00	
	e (Last, First, Middle Initial) el H Turner, , Sr. ddress Box 2923			Date of Receipt
	DOX 2920			12 15 2010
City Shawne	e Mission	State KS	Zip Code 66201-1323	Transaction ID: 18795112  Amount of Each Receipt this Period
FEC ID n	umber of contributing litical committee.	C		250.00
Name of Shawnee Center	Employer Mission Medical	Occupation Chief Exe	n ecutive Officer	
Receipt F	or: nary General er (specify) <b>▼</b>	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL	of Receipts This Page (optional)			650.00

	EHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 91 / 208 (check only one)    X
or f	vinformation copied from such Reports and Stor commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may name and ado	not be sold or used by any perso fress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Mr. Steven B. Poage Mailing Address 3401 SW Alameda City	State	Zip Code	Date of Receipt    M
	Topeka FEC ID number of contributing federal political committee.	KS C	66614-5109	Amount of Each Receipt this Period 450.00
	Name of Employer Kansas Hospital Association Receipt For: Primary General Other (specify)		n sident/CFO Year-to-Date ▼ 450.00	
j <b>.</b>	Full Name (Last, First, Middle Initial) Mr. Thomas L. Bell Mailing Address 4301 NW Valley Road			Date of Receipt
	City	State	Zip Code	Transaction ID: 18795126
	Topeka FEC ID number of contributing federal political committee.	C	66618-3445	Amount of Each Receipt this Period 500.00
	Name of Employer Kansas Hospital Associati- on Receipt For:	Occupation President		
	Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 1240.17	
	Full Name (Last, First, Middle Initial) Mr. Leslie Lacy			Date of Receipt
	Mailing Address P O Box 547			12 15 2010
	City	State	Zip Code	Transaction ID: 18795130
•	Saint Francis FEC ID number of contributing federal political committee.	C	67756-0547	Amount of Each Receipt this Period 500.00
•	Name of Employer Cheyenne County Hospital	Occupation Administr		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SL	JBTOTAL of Receipts This Page (optional)			1450.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 92 / 208 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any pename and address of any political committee	erson for the purpose of soliciting contributions e to solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Mrs. Jodi A. Schmidt  Mailing Address 1902 S. U.S. Hwy. 59  City  Parsons  FEC ID number of contributing federal political committee.  Name of Employer Labette Health	State Zip Code KS 67357-0956  C	Date of Receipt    M
Receipt For:  Primary General  Other (specify) ▼	Administrator  Aggregate Year-to-Date ▼  380.00	•
Full Name (Last, First, Middle Initial) Mr. Kevin P Conlin Mailing Address 3720 East Bayley		Date of Receipt    M
City	State Zip Code	Transaction ID: 18795145
Wichita FEC ID number of contributing federal political committee.	KS 67218-3002	Amount of Each Receipt this Period  250.00
Name of Employer Via Christi Health System  Receipt For:  Primary General  Other (specify) ▼	Occupation President and Chief Executive Off  Aggregate Year-to-Date  250.00	icer
Full Name (Last, First, Middle Initial) Mr. Gerald J Marquette, , Jr.		Date of Receipt
Mailing Address PO BOX 1446		12
City	State Zip Code	Transaction ID: 18795204
Coffeyville FEC ID number of contributing federal political committee.	KS 67337-6746	Amount of Each Receipt this Period 250.00
Name of Employer Coffeyville Regional Medical Center Receipt For:  Primary General Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   250.00	
SUBTOTAL of Receipts This Page (optional) .		880.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 93 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16	
Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.	
NAME OF COMMITTEE (In Full) American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Shelly Dunham		Date of Receipt	
Mailing Address P O Box 489		12 17 2010	
City	State Zip Code	Transaction ID: 18795208	
Okeene	OK 73763-0489	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	21.00	
Name of Employer Okeene Municipal Hospital	Occupation Chief Executive Officer		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		
Full Name (Last, First, Middle Initial) Mr. Charles Van Houden	I	Date of Receipt	
Mailing Address 4631 Country Club		12 15 2010	
City	State Zip Code	Transaction ID: 18795212	
<u>Chanute</u>	KS 66720-5198	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	425.00	
Name of Employer Neosho Memorial Regional Medical Cente	Occupation Chief Medical Officer		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00		
Full Name (Last, First, Middle Initial) Ms. Andrea Easton		Date of Receipt	
Mailing Address 258 Evergreen Road #4		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City	State Zip Code	Transaction ID: 18795305	
Lake Oswego	OR 97034-3145	Amount of Each Receipt this Period	
FEC ID number of contributing federal political committee.	C	43.76	
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Director of Advocacy		
Receipt For:	Aggregate Year-to-Date ▼		
Primary General Other (specify) ▼	532.70		
CURTOTAL of Descirts This Dags (entiand)		489.76	
SUBTOTAL of Receipts This Page (optional)	······		

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 94 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	d Statements may not be sold or used by any persor the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Linda Lang		Date of Receipt
Mailing Address 4000 Kruse Way Pla	ace #2-100 State Zip Code	1 2 1 5 2 0 1 0 Transaction ID: 18795586
Lake Oswego	OR 97035-2543	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer Oregon Association of Hospitals & Heal Receipt For: Primary General	Occupation Director of Member Relations  Aggregate Year-to-Date ▼  650.00	
Full Name (Last, First, Middle Initial) Mr. Kelly C Morgan Mailing Address 2700 Stewart Parkw	ray	Date of Receipt  1 2 1 5 2 0 1 0
City	State Zip Code	Transaction ID: 18795595
Roseburg	OR 97470-1281	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Mercy Medical Center	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. Mel Pyne		Date of Receipt
Mailing Address 3333 Riverbend Driv	/e	12 15 2010
City	State Zip Code	Transaction ID: 18795604
Springfield	OR 97477-8800	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Sacred Heart Medical Cent- er at Riverbe	Occupation CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SURTOTAL of Receipts This Page (antional	)	870.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS  Any information copied from such Reports an	for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 95 / 208 (check only one)    X
or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PA	the name and address of any political committee to s	solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. Jonathan R Bates, , M.D.  Mailing Address 1 Children's Way		Date of Receipt
City	State Zip Code	1 2 1 7 2 0 1 0 Transaction ID: 18795634
Little Rock	AR 72202-3500	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	325.00
Name of Employer Arkansas Children's Hospi- tal	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	
Full Name (Last, First, Middle Initial) Mr. Paul Betz		Date of Receipt
Mailing Address 3024 Stadium Boul	evard	1 2 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 18795635
Jonesboro  FEC ID number of contributing federal political committee.	AR 72401-7415	Amount of Each Receipt this Period 227.50
Name of Employer NEA Baptist Memorial Hosp- ital	Occupation Chief Executive Officer	_
Receipt For:  Primary General  Other (specify) ♥	Aggregate Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Russell D Harrington, , Jr.		Date of Receipt
Mailing Address 9601 Interstate 630	), Exit 7	1 2 1 7 2 0 1 0
City	State Zip Code	Transaction ID: 18795637
Little Rock	AR 72205-7202	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	81.43
Name of Employer Baptist Health	Occupation President and Chief Executive Officer	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 325.43	
SUBTOTAL of Receipts This Page (optional	NI)	633.93

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	^)	Use separate schedule(s) for each category of the Detailed Summary Page	Check only one)   X   11a
Any information copied from such Reports a or for commercial purposes, other than using	nd Statements may	not be sold or used by any perso	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA		according political committee to	
Full Name (Last, First, Middle Initial) Mr. James L Magee			Date of Receipt
Mailing Address 1206 Gordon Duck	worth Drive		M M / D D / Y Y Y Y Y 1 1 2 0 1 0
City Piggott	State AR	Zip Code 72454-1911	Transaction ID: 18795639  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	12-10-11	227.50
Name of Employer Piggott Community Hospital	Occupation Executive		
Receipt For:  Primary General  Other (specify) ▼		Year-to-Date ▼ 227.50	
Full Name (Last, First, Middle Initial) Mr. Barry Pipkin			Date of Receipt
Mailing Address 10301 Maumelle B	lvd		12 17 Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18795640
North Little Rock	AR	72113-6620	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		227.50
Name of Employer Rivendell Behavioral Heal- th Services o	Occupation Chief Exe	n ecutive Officer and Managing	
Receipt For:		Year-to-Date ▼	9-1
Primary General Other (specify) ▼		227.50	
Full Name (Last, First, Middle Initial) Ms. Karen Perdue			Date of Receipt
Mailing Address 943 West 6th Aven	nue		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18795649
Anchorage	AK	99501-2033	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		500.00
Name of Employer Alaska State Hospital &	Occupation	n : and Chief Executive Officer	.
Nursing Home A Receipt For:		Year-to-Date ▼	+
Primary General	7.199.09410		1
Other (specify) ▼		500.00	
			955.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 97 / 208 (check only one)    X
r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal ename and address of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC  Full Name (Last, First, Middle Initial)		
Mr. Christopher M O'Connor		Date of Receipt
Mailing Address 1450 Chapel Street		12 21 2010
City	State Zip Code	Transaction ID: 18799241
New Haven	CT 06511-4405	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Hospital of Saint Raphael	Occupation President and Chief Executive Office	r
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Matthew Anderson, JD		Date of Receipt
Mailing Address 2550 University Aven	ue W.	12 17 2010
City	State Zip Code	Transaction ID: 18799320
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	134.61
Name of Employer Minnesota Hospital Associ- ation	Occupation Vice Pres, Regulatory/Strategic Affai	r
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  384.60	
Full Name (Last, First, Middle Initial) Ms. Ann Gibson	.l	Date of Receipt
Mailing Address 2550 University Aven Suite 350-S	ue W.	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18799324
Saint Paul	MN 55114-1052	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	94.22
Name of Employer Minnesota Hospital Associ- ation	Occupation Director, Federal Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  277.85	
SUBTOTAL of Receipts This Page (optional)		728.83

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 98 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Roger E Green Mailing Address 559 Capitol Boulevard City Saint Paul	State Zip Code MN 55103-0000	Date of Receipt    M M
FEC ID number of contributing federal political committee.  Name of Employer HealthEast Care System  Receipt For:  Primary General Other (specify)	Occupation Vice President Strategy, Policy and C Aggregate Year-to-Date  270.81	20.83
Full Name (Last, First, Middle Initial) Mr. Richard Kreyer  Mailing Address 2550 University Aven  City	ue W. State Zip Code	Date of Receipt  1 2 1 7 2 0 1 0
Saint Paul	MN 55114-1052	Transaction ID: 18799327  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	76.92
Name of Employer Minnesota Hospital Association Receipt For:  Primary General  Other (specify) ▼	Occupation Vice President, Work Force  Aggregate Year-to-Date   326.91	
Full Name (Last, First, Middle Initial) Mr. Thomas O'Connor		Date of Receipt
Mailing Address 4050 Coon Rapids Bo	pulevard	12 17 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City <u>Coon Rapids</u>	State Zip Code MN 55433-2522	Transaction ID: 18799328  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	25.45
Name of Employer Mercy Hospital	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	1	<del>'</del>

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 99 / 208   (check only one)     X   11a     11b     11c     12     13   14     15     16
Any information copied from such Reports an or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Joe Schindler			Date of Receipt
Mailing Address 2550 University Ave	enue W.		M M / D D / Y Y Y Y Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y 1 Y
City Saint Paul	State MN	Zip Code 55114-1052	Transaction ID: 18799330  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		123.97
Name of Employer Minnesota Hospital Associ- ation		irector of Data and Finance I	Pq
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 298.93	
Full Name (Last, First, Middle Initial) Mr. Mark Sonneborn			Date of Receipt
Mailing Address 2550 University Ave	enue W.		12 17 2010
City Saint Paul	State MN	Zip Code 55114-1052	Transaction ID: 18799332
FEC ID number of contributing federal political committee.	C	33114-1032	Amount of Each Receipt this Period  140.00
Name of Employer Minnesota Hospital Associ-	Occupation Vice Pres	n sident of Information Service	
ation Receipt For:  Primary General  Other (specify) ▼	<del></del>	e Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Ms. Susan Stout			Date of Receipt
Mailing Address 2550 University Ave Suite 350-S	enue W.		1 2 1 7 2 0 1 0
City Saint Paul	State MN	Zip Code 55114-1052	Transaction ID: 18799333  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		94.22
Name of Employer Minnesota Hospital Associ- ation		State Government Relations	3_
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 269.20	
SUBTOTAL of Receipts This Page (optional	<u> </u>		358.19

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 100 / 208 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using NAME OF COMMITTEE (In Full)	the name and add	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Ms. Peggy Westby  Mailing Address 2550 University Ave  Suite 350-S  City		Zip Code	Date of Receipt  1 2 1 7 2 0 1 0
Saint Paul  FEC ID number of contributing federal political committee.	MN	55114-1052	Transaction ID: 18799336  Amount of Each Receipt this Period  134.61
Name of Employer Minnesota Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Vice Pres Aggregate		
Full Name (Last, First, Middle Initial) Mr. Joseph A. Carr Mailing Address 2378 Orchard Crest	t Blvd.		Date of Receipt  1 2 2 4 2 0 1 0
City	State	Zip Code	Transaction ID: 18800220
Manasquan	NJ	08736-4001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		10.00
Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼		ormation Officer  Year-to-Date ▼  490.00	
Full Name (Last, First, Middle Initial) Ms. Jessica Cohen			Date of Receipt
Mailing Address 760 Alexander Road			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Princeton	State NJ	Zip Code 08540-6305	Transaction ID: 18800222
FEC ID number of contributing federal political committee.	C	000+0-0000	Amount of Each Receipt this Period
Name of Employer New Jersey Hospital Assoc- iation Receipt For:	Occupation Director Aggregate	n Year-to-Date <b>▼</b>	
Primary General Other (specify)	53. 534.0	245.00	]
SUBTOTAL of Receipts This Page (optiona	1		154.61

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate scho for each category Detailed Summary	of the
A	ny information copied from such Reports and S for commercial purposes, other than using the	atements may not be sold or used language and address of any political controls.	by any person for the purpose of soliciting contributions committee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Belinda Brown Cooper		Date of Receipt
	Mailing Address 121 Clear Creek Road	7'- 0-4	12 24 2010
	City Langhorne	State Zip Code PA 19047	Transaction ID: 18800223  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Association Receipt For:	Occupation Vice President, Human Res Aggregate Year-to-Date ▼	sources
	Primary General Other (specify) ▼		190.00
	Full Name (Last, First, Middle Initial)  Ms. Mary A. Ditri  Mailing Address 9 Jumping Brook Drive		Date of Receipt
	City	State Zip Code	12 24 2010
	Neptune	NJ 07753-3326	Transaction ID: 18800225  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	240.00
-	Full Name (Last, First, Middle Initial) Ms. Theresa L. Edelstein		Date of Receipt
	Mailing Address 27 Harvest Lane		12 24 2010
	City	State Zip Code	Transaction ID: 18800226
	Livingston	NJ 07039-2750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President Continuing	Care Service
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼	190.00
Г			30.00

	SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	f the
A O	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used b name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
∠ <b>.</b> .	Full Name (Last, First, Middle Initial) Mr. Sean J. Hopkins Mailing Address 6180 Lower Mountain I  City	Road State Zip Code	Date of Receipt    M M
	New Hope	PA 18938	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	10.00
	Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Sr. VP., Health Economics Aggregate Year-to-Date ▼	35.01
3.	Full Name (Last, First, Middle Initial) Mr. Fredrick J. Jacobs Mailing Address 23 E. Delaware Avenue		Date of Receipt  1 2 2 4 2 0 1 0
	City	State Zip Code	Transaction ID: 18800230
	Pennington FEC ID number of contributing federal political committee.	NJ 08534-2302	Amount of Each Receipt this Period 10.00
	Name of Employer New Jersey Hospital Assoc- iation Receipt For:	Occupation General Counsel Aggregate Year-to-Date	
	Primary General Other (specify) ▼	25	50.00
	Full Name (Last, First, Middle Initial) Mr. William D. Kennedy		Date of Receipt
	Mailing Address 1549 North Valley Roa	d	12 24 2010
	City	State Zip Code	Transaction ID: 18800231
	Malvern  FEC ID number of contributing federal political committee.	PA 19355	Amount of Each Receipt this Period  10.00
	Name of Employer New Jersey Hospital Association	Occupation Senior Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 25	50.00
[	SUBTOTAL of Receipts This Page (optional)		30.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 103 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports and	Statements may not be sold or used by any person	for the purpose of soliciting contributions
<u> </u>	he name and address of any political committee to s	collect contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Timothy J. Keough		Date of Receipt
Mailing Address 23 Nelson Drive		12 24 2010
City	State Zip Code	Transaction ID: 18800232
Barnegat	NJ 08005-2174	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Vice President, Health Information Mgi	- П
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. Steve E. Krebs		Date of Receipt
Mailing Address 73 Tindall Rd		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18800233
Robbinsville	NJ 08691-2508	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Director, Conference Services	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. David P. Lavins		Date of Receipt
Mailing Address 10 Fox Chase Road		12 24 2010
City	State Zip Code	Transaction ID: 18800234
Malvern	PA 19355	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	10.00
Name of Employer New Jersey Hospital Assoc- iation	Occupation Chief Financial Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	990.00	
		30.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 104 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report for commercial purposes, other than NAME OF COMMITTEE (In Full)  American Hospital Association	orts and Statements may not be sold or used by any person using the name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial Ms. Kerry A. McKean-Kelly Mailing Address 40 Imlaystowr  City  East Windsor  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association  Receipt For:  Primary General  Other (specify)	Road  State Zip Code NJ 08520-6209  C  Occupation Assistant Vice President  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 4 2 0 1 0  Transaction ID: 18800235  Amount of Each Receipt this Period  10.00
Full Name (Last, First, Middle Initial Mr. Randall J. Minniear Mailing Address 3901 Worthin City  Freehold  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association		Date of Receipt  M M Z Z 4 Z 0 1 0  Transaction ID: 18800237  Amount of Each Receipt this Period  10.00
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial Ms. Joann M. Morgano Mailing Address 7 Cottonwood  City Lumberton		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association Receipt For:  Primary General Other (specify)	Occupation Director, Marketing & Communication  Aggregate Year-to-Date   250.00	Amount of Each Receipt this Period  10.00
SUBTOTAL of Receipts This Page (c	ptional)	30.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 105 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Sally Roslow  Mailing Address 21 Sparrow Walk  City  Newtown  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association  Receipt For:  Primary General  Other (specify)	State Zip Code PA 18940  C  Occupation VP Development & Trustee Relations Aggregate Year-to-Date  250.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Mr. Roger D. Sarao, Jr.  Mailing Address 4 Poppy Lane  City Howell  FEC ID number of contributing federal political committee.  Name of Employer New Jersey Hospital Association  Receipt For:  Primary General Other (specify)	State Zip Code NJ 07731-1451  C  Occupation VP Health Economics  Aggregate Year-to-Date  490.00	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Ms. Cynthia A. Sorg Mailing Address 33 Second Street  City Hopewell  FEC ID number of contributing	State Zip Code NJ 08525-2014	Date of Receipt    M M
federal political committee.  Name of Employer New Jersey Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation Assistant to President Aggregate Year-to-Date  250.00	10.00
SUBTOTAL of Receipts This Page (optional)		30.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 106 / 208 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Hospital Association PAC	the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Patricia Davis Mailing Address 4414 Manchester C	ourt		Date of Receipt
City Norman FEC ID number of contributing	State OK	Zip Code 73072-3915	1 2 2 8 2 0 1 0  Transaction ID: 18800251  Amount of Each Receipt this Period  765.00
federal political committee.  Name of Employer Oklahoma Hospital Association Receipt For:  Primary  General Other (specify) ▼		Vice President Year-to-Date ▼ 1325.00	
Full Name (Last, First, Middle Initial) Ms. LaWanna S. Halstead, RN, MPH Mailing Address 4000 Lincoln Boule	vard		Date of Receipt  1 2 2 8 2 0 1 0
City	State	Zip Code	Transaction ID: 18800253
Oklahoma City	OK	73105-5207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Oklahoma Hospital Associa- tion		ty & Clinical Initiatives	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Craig W. Jones, FACHE	<b>1</b>		Date of Receipt
Mailing Address 1904 Windermere [	Orive		12 28 2010
City	State	Zip Code	Transaction ID: 18800254
Norman FEC ID number of contributing	OK	73072-3005	Amount of Each Receipt this Period
federal political committee.	C		4125.00
Name of Employer Oklahoma Hospital Associa- tion	Occupation President	_	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 5000.00	
SUBTOTAL of Receipts This Page (optiona	<u> </u>		5140.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 107 / 208 (check only one)    X
or for co	rmation copied from such Reports and Stammercial purposes, other than using the r E OF COMMITTEE (In Full) Prican Hospital Association PAC	atements may name and ado	not be sold or used by any persor ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Mr. R Mailir City Okla	Jame (Last, First, Middle Initial) ick Snyder ng Address 4000 Lincoln Boulevard thoma City  ID number of contributing al political committee. e of Employer noma Hospital Associa-	State OK C		Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 8 2 8 2 0 1 0  Transaction ID: 18800255  Amount of Each Receipt this Period  500.00
<u>tion</u>	ipt For: Primary General Other (specify) ▼		ident, Finance & Information Year-to-Date ▼ 1000.00	
<b>3.</b> Ms. F	Name (Last, First, Middle Initial) am Wells ng Address 4000 N. Lincoln Blvd.			Date of Receipt  1 2 2 8 2 0 1 0
FEC	thoma City  ID number of contributing all political committee.	State OK	Zip Code 73105-5200	Transaction ID: 18800256  Amount of Each Receipt this Period  125.00
Oklal <u>tion</u>	e of Employer noma Hospital Associa- ipt For: Primary General Other (specify) •		of Accounting Year-to-Date ▼ 250.00	
Ms. N	Jame (Last, First, Middle Initial) fary Winters ng Address 7750 N Chisholm HIII R	24		Date of Receipt
City Yuki	on	State OK	Zip Code 73099-9134	Transaction ID: 18800257  Amount of Each Receipt this Period
feder Name Oklai	ID number of contributing al political committee. e of Employer noma Hospital Associa-	Occupation VP Educa	ation & Support Services	250.00
tion Rece	ipt For: Primary General Other (specify) ▼		Year-to-Date ▼ 500.00	
SUBTO	TAL of Receipts This Page (optional)		·····	875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 108 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. William H Anderson Mailing Address P O Box 610  City Sheffield  FEC ID number of contributing federal political committee.  Name of Employer Helen Keller Hospital  Receipt For: Primary General	State Zip Code AL 35660-0610  C  Occupation President  Aggregate Year-to-Date ▼	Date of Receipt  M M J D D J Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Sammy Watson  Mailing Address 809 University Boule  City  Tuscaloosa		Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer DCH Health System  Receipt For:  Primary General  Other (specify) ▼	Occupation Director, Community Relations  Aggregate Year-to-Date   500.00	500.00
Full Name (Last, First, Middle Initial) Ms. Jana Wyatt Mailing Address P O Box 1010  City	State Zip Code	Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Opp FEC ID number of contributing federal political committee.	AL 36467-1010	Amount of Each Receipt this Period  350.00
Name of Employer Mizell Memorial Hospital  Receipt For: Primary General Other (specify)	Occupation Chief Executive Officer  Aggregate Year-to-Date   350.00	
SUBTOTAL of Receipts This Page (optional)		1850.00

Dallas  TX 75244-6942  Amount of Each Receipt FCI D number of contributing federal political committee.  Name of Employer LHP Hospital Group  Primary General Obter (specify) ▼  Date of Receipt  Pull Name (Last, First, Middle Initial)  Mr. William D Jacobsen  Mailing Address 180 Floyd Avenue  City State Zip Code  VA 24151-1318  Amount of Each Receipt  Transaction ID: 1880  Amount of Each Receipt  Aggregate Year-to-Date ▼  Transaction ID: 1880  C.  Pull Name (Last, First, Middle Initial)  Amount of Each Receipt  Transaction ID: 1880  Amount of Each Receipt  Transaction	PAGE 109 / 208  11c	(check only one)  X 11a 11b 11c 12	Use separate schedule(s) for each category of the Detailed Summary Page	HEDULE A (FEC Form 3X) EMIZED RECEIPTS	
Milling Address 4836 Twin Post RD  City State Zip Code TX 75244-6942  FEC ID number of contributing federal political committee.  Name of Employer LPH Post RD Division President Receipt For: Primary General Other (specify) ▼	ng contributions uch committee.	n for the purpose of soliciting contribution solicit contributions from such committee	not be sold or used by any perso dress of any political committee to	or commercial purposes, other than using the name and ac NAME OF COMMITTEE (In Full)	Ar
Dallas  TX 75244-6942  Amount of Each Receipt FEC ID number of contributing federal political committee.  Name of Employer   Occupation   Division President  Receipt For:	2010	M M / D D / Y Y Y	Zip Code	Mr. Paul Kappelman Mailing Address 4836 Twin Post RD	
Same of Employer Carlion Frankin Memorial Hospital Receipt For:   Primary   General Other (specify) ▼		Amount of Each Receipt this Period	·		
Receipt For:	500.00	500.0			
Receipt For:     Primary				Name of Employer Occupation LHP Hospital Group Division	
Mr. William D Jacobsen  Mailing Address 180 Floyd Avenue  City  Rocky Mount  FEC ID number of contributing federal political committee.  Name of Employer Carilion Franklin Memorial Hospital Receipt For: Primary Other (specify)  Mailing Address 1855 Saint Francix St.  City  Reston  FEC ID number of contributing federal political committee.  Date of Receipt  Amount of Each Receipt  Amount of Each Receipt  Aggregate Year-to-Date ▼  Transaction ID: 1880  Amount of Each Receipt  M M M / D D M D D M D D M D D M D D M D D M D D M D D M D D M D D M D D D M D D D M D D D M D D M D D D M D D D M D D D M D D D M D D D M D D D M D D D M D D D M D D D D M D			Year-to-Date ▼	Receipt For:  Primary  General  Aggregat	
City State Zip Code Rocky Mount VA 24151-1318  Recipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Angela Mannion Mailing Address 1855 Saint Francix St.  City State Zip Code Reston VA 20190-6247  FEC ID number of contributing federal political committee.  Date of Receipt Transaction ID: 1880 Amount of Each Receipt Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 1880  Amount of Each Receipt  Transaction ID: 1880  Transaction		╡ '		Mr. William D Jacobsen	 3.
Rocky Mount  VA 24151-1318  Amount of Each Receipt FEC ID number of contributing federal political committee.  Name of Employer Carilion Franklin Memorial Hospital Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Ms. Angela Mannion  Mailing Address 1855 Saint Francix St.  City State Zip Code Transaction ID: 1880  Reston VA 20190-6247  FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt For:  Primary General Occupation Senior VP Human Resources  Receipt For:  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	2010			walling Address 180 Floyd Avenue	
FEC ID number of contributing federal political committee.  Name of Employer Carilion Franklin Memorial Hospital Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Ms. Angela Mannion  Mailing Address 1855 Saint Francix St.  City State Zip Code Transaction ID: 1880  Reston VA 20190-6247  FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt For:  Primary General  Occupation Senior VP Human Resources  Receipt For:  Primary General  Aggregate Year-to-Date ▼		Transaction ID: 18800264	•	•	
Carlion Franklin Memorial Hospital Receipt For:  Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Ms. Angela Mannion Mailing Address 1855 Saint Francix St.  City State Zip Code Reston FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt For: Primary General  Chief Executive Officer Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 1880  Amount of Each Receipt  C  C  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼  Aggregate Year-to-Date ▼	seipt this Period	Amount of Each Receipt this Period 350.0	24151-1318	FEC ID number of contributing	
Primary General Other (specify) ▼  State Zip Code Reston VA 20190-6247  FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt For: Primary General  Primary General  Date of Receipt  Transaction ID: 1880  Amount of Each Receipt  C  Occupation Senior VP Human Resources  Aggregate Year-to-Date ▼  Primary General				Carilion Franklin Memorial	
Ms. Angela Mannion  Mailing Address 1855 Saint Francix St.  City State Zip Code  Reston VA 20190-6247  FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt Transaction ID: 1880  Amount of Each Receipt  C  Occupation Senior VP Human Resources  Receipt For:  Aggregate Year-to-Date ▼  250.00				Primary General	
City State Zip Code Transaction ID: 1880  Reston VA 20190-6247  FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt For: Primary General  1 2 2 2  Transaction ID: 1880  Amount of Each Receipt For: Senior VP Human Resources  Aggregate Year-to-Date ▼		Date of Receipt			— ).
Reston  VA 20190-6247  Amount of Each Recei  C  Name of Employer Inova Health System  Receipt For:  Primary  Qeneral  Primary  Amount of Each Receipt Receipt Receipt Receipt For:  Aggregate Year-to-Date  Amount of Each Receipt Re	2010			Mailing Address 1855 Saint Francix St.	
FEC ID number of contributing federal political committee.  Name of Employer Inova Health System  Receipt For:  Primary  General  C  Occupation Senior VP Human Resources  Aggregate Year-to-Date ▼		Transaction ID: 18800265	·		
Name of Employer   Occupation   Senior VP Human Resources    Receipt For:   Aggregate Year-to-Date ▼	· · · · · ·	Amount of Each Receipt this Period	20190-6247	FFO ID worth and found the first	
Receipt For:  Primary  General  Aggregate Year-to-Date  750,00	350.00	350.0			
Primary General 350,00		1		Name of Employer Occupation Inova Health System Senior V	
Other (specify) ▼			Year-to-Date ▼ 350.00		
SUBTOTAL of Receipts This Page (optional)	1200.00	1200.0		IBTOTAL of Receipts This Page (optional)	s

ľ	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS  Any information copied from such Reports and Sta	atements may	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 110 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17  In for the purpose of soliciting contributions
<b>A</b> .	r for commercial purposes, other than using the name and address of any political committee to so NAME OF COMMITTEE (In Full) American Hospital Association PAC  Full Name (Last, First, Middle Initial) Ms. Paula L. Bruening Mailing Address 8745 Baltimore Street  City State Zip Code			Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
_	Savage  FEC ID number of contributing federal political committee.  Name of Employer Doctors Community Hospital  Receipt For: Primary General Other (specify)		20763-9705  n sident Nursing Year-to-Date  245.00	Amount of Each Receipt this Period  245.00
В.	Full Name (Last, First, Middle Initial) Mr Thomas J Crowley  Mailing Address 2100 Poplar Ridge Road  City Pasadena  FEC ID number of contributing federal political committee.  Name of Employer Doctors Community Hospital  Receipt For: Primary General Other (specify)	State MD  C Occupation Executive	Zip Code 21122-3820  1 e Vice President Year-to-Date ▼ 245.00	Date of Receipt  M M M / 22 / 2010  Transaction ID: 18800269  Amount of Each Receipt this Period  245.00
_ С.	Full Name (Last, First, Middle Initial) Mr. Philip B Down Mailing Address 10414 Queensway Drive City Ellicott City FEC ID number of contributing federal political committee.  Name of Employer Doctors Community Hospital  Receipt For: Primary General Other (specify)	State MD  C Occupation President	Zip Code 21042-5869  It and Chief Executive Officer Year-to-Date ▼ 300.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			790.00

TOTAL This Period (last page this line number only) ......

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 111 / 208 (check only one)  X 11a 11b 11c 12
	Statements may not be sold or used by any persone name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Dennis P Scanlon		Date of Receipt
Mailing Address 327 Lazywood Court  City	State Zip Code	1 2 2 2 2 0 1 0  Transaction ID: 18800271
Millersville	MD 21108-2418	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	245.00
Name of Employer Doctors Community Hospital	Occupation Vice President Finance	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 245.00	
Full Name (Last, First, Middle Initial) Mr. Paul Grenaldo		Date of Receipt
Mailing Address 14313 Shoreham Dr		12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18800272
Silver Spring FEC ID number of contributing	MD 20905-4481	Amount of Each Receipt this Period
federal political committee.	C	245.00
Name of Employer Doctors Community Hospital	Occupation Chief Operatig Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	245.00	
Full Name (Last, First, Middle Initial) Dr. Gabriel Jaffe, , M.D.		Date of Receipt
Mailing Address 8704 Little Patuxent	Court	12 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Odenton	State Zip Code MD 21113-2797	Transaction ID: 18800273  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 21113-2131	245.00
Name of Employer Doctors Community Hospital	Occupation Vice President, Medical Affairs	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
SUBTOTAL of Receipts This Page (optional)		735.00

	HEDULE A (FEC Form 3X)  MIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 112 / 208 (check only one)    X
or fo	or commercial purposes, other than using the	tatements may not be sold or used by any per name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
1 1	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
. <u>1</u>	Full Name (Last, First, Middle Initial) Ms. Charlene B. Lundgren Mailing Address 8699 Guilford Road		Date of Receipt
_		State Zip Code	12 22 2010
	City Columbia	MD 21046-1444	Transaction ID: 18800274  Amount of Each Receipt this Period
	FEC ID number of contributing ederal political committee.	C	245.00
- 1	Name of Employer Doctors Community Hospital	Occupation Vice President, Human Resources	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
	Full Name (Last, First, Middle Initial) Mr. Scott Gregerson		Date of Receipt
N	Mailing Address P.O. Box 147		12 22 2010
	City	State Zip Code	Transaction ID: 18800275
F	Greenbelt FEC ID number of contributing ederal political committee.	MD 20768-0147	Amount of Each Receipt this Period  245.00
_ 1 1	Name of Employer Doctors Community Hospital	Occupation VP, Business Development	
F	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 245.00	
	Full Name (Last, First, Middle Initial) Mr Mike Robertson		Date of Receipt
N	Mailing Address P. O. Box 6000		1 2 2 2 2 0 1 0
	Dity	State Zip Code	Transaction ID: 18800310
F	Ocala FEC ID number of contributing ederal political committee.	FL 34478-6000	Amount of Each Receipt this Period  100.00
ľ	Name of Employer Munroe Regional Medical Center	Occupation VP Strategic Planning	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	
en	BTOTAL of Receipts This Page (optional)		590.00

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 113 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than use NAME OF COMMITTEE (In Full)  American Hospital Association	s and Statements may not be sold or used by any perso sing the name and address of any political committee to PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Sally Jackson  Mailing Address 8250 College Pa Suite 103	•	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18800317
Fort Myers  FEC ID number of contributing federal political committee.	FL 33919-5199	Amount of Each Receipt this Period
Name of Employer Lee Memorial Health System  Receipt For:  Primary  General  Other (specify) ▼	Occupation System Director of Community Project Aggregate Year-to-Date  350.00	ents
Full Name (Last, First, Middle Initial) Mr Warren E Jones Mailing Address 1300 Miccosuke	ee Road	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	
Tallahassee	FL 32308-5054	Transaction ID: 18800319  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Tallahassee Memorial Heal- thCare Receipt For:  Primary General Other (specify) ▼	Occupation Vice President and Chief Communical Aggregate Year-to-Date  500.00	ution
Full Name (Last, First, Middle Initial) Mr. Edward J. Quinlan		Date of Receipt
Mailing Address 20 River Run		12 28 2010
City	State Zip Code	Transaction ID: 18800323
East Greenwich	RI 02818-1502	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Hospital Association of Rhode Island	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	
	L	

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 114 / 208 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)  American Hospital Association F	and Statements may not be sold or used by any persoing the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Paula Minnehan Mailing Address 283 Gallopiny Hi	II Road	Date of Receipt
City Hopkinton	State Zip Code NH 03229-3402	1 2 2 8 2 0 1 0  Transaction ID: 18800331  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	30.00
Name of Employer New Hampshire Hospital Association Receipt For:  Primary  General  Other (specify) ▼	Occupation V.P., Finance and Rural Hospitals  Aggregate Year-to-Date   300.00	
Full Name (Last, First, Middle Initial) Mr. Steve M. Ahnen Mailing Address 125 Airport Road		Date of Receipt  1 2 2 8 2 0 1 0
City	State Zip Code	Transaction ID: 18800332
Concord  FEC ID number of contributing federal political committee.	NH 03301-7300	Amount of Each Receipt this Period 83.33
Name of Employer New Hampshire Hospital Association Receipt For:  Primary  General  Other (specify) ▼	Occupation President and CEO  Aggregate Year-to-Date   833.34	
Full Name (Last, First, Middle Initial) Mr. Gregory J Walker		Date of Receipt
Mailing Address 789 Central Aver	nue	12 28 2010
City	State Zip Code	Transaction ID: 18800345
Dover  FEC ID number of contributing federal political committee.	NH 03820-2526	Amount of Each Receipt this Period  350.00
Name of Employer Wentworth-Douglass Hospit- al	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SURTOTAL of Receipts This Page (opti	onal)	463.33

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 115 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ne name and address of any political committee to s	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr Frank G McDougall		Date of Receipt
Mailing Address One Medical Center	Drive	12 28 2010
City	State Zip Code	Transaction ID: 18800348
Lebanon	NH 03756-0001	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Dartmouth-Hitchcock Medic-	Occupation	7
al Center	Vice President, Government Relations	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. Warren K West		Date of Receipt
Mailing Address 600 Saint Johnsbury	Road	1 2 2 8 2 0 1 0
City	State Zip Code	Transaction ID: 18800350
Littleton	NH 03561-3442	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Littleton Regional Hospit- al	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Ms. Claire L Bowen		Date of Receipt
Mailing Address 243 Elm Street		1 2 2 8 2 0 1 0
City	State Zip Code	Transaction ID: 18800351
Claremont	NH 03743-2099	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Valley Regional Hospital	Occupation Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (optional)	<b></b>	1050.00

TOTAL This Period (last page this line number only) .....

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 116 / 208 (check only one)    X
A	for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr Richard C Lord		Date of Receipt
	Mailing Address 222 Berkeley St		12 28 2010
	City Boston	State Zip Code MA 02116-3748	Transaction ID: 18800377  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	350.00
	Name of Employer Massachusetts Hospital As- sociation	Occupation Trustee	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	
	Full Name (Last, First, Middle Initial) Mr. Tim Blasl		Date of Receipt
	Mailing Address 1622 E. Interstate Ave Suite B	12 / 28 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City Bismarck	Transaction ID: 18800410	
	FEC ID number of contributing federal political committee.	ND 58503-0561	Amount of Each Receipt this Period  352.00
	Name of Employer North Dakota Hospital Ass- ociation	Occupation Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 352.00	
	Full Name (Last, First, Middle Initial) Mr. Jerry E. Jurena	Date of Receipt	
	Mailing Address 1622 E. Interstate Ave Suite B		12 / 28 / 2010
	City Bismarck	State Zip Code ND 58503-0561	Transaction ID: 18800411  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	150.00
	Name of Employer North Dakota Hospital Ass- ociation	Occupation President	
	Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Γ,	SUBTOTAL of Receipts This Page (optional) .	1	852.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary P	the (check only one)		
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by name and address of any political con	any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.		
NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Mr. Scott Kelly		Date of Receipt		
Mailing Address 230 Jackson Creek Di		12 28 7 2010		
City Jacksonville	State Zip Code OR 97530-9792	Transaction ID: 18800417  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.	C	175.00		
Name of Employer Asante Health System	Occupation Vice President Planning & De	evelopment		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00		
Full Name (Last, First, Middle Initial) Mr. David Kinyon		Date of Receipt		
Mailing Address 1110 NW Hillside Dr		12 28 2010		
City	State Zip Code	Transaction ID: 18800420		
Grants Pass  FEC ID number of contributing federal political committee.	OR 97526-1175	Amount of Each Receipt this Period  250.00		
Name of Employer Asante Health System	Occupation Output Svcs Administrator			
Receipt For:  Primary  General  Other (specify) ▼	Aggregate Year-to-Date ▼	0.00		
Full Name (Last, First, Middle Initial) Mr. Kevin Earls	<u> </u>	Date of Receipt		
Mailing Address 671 Kingwood Drive N	W	1 2 D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City	State Zip Code	Transaction ID: 18800421  Amount of Each Receipt this Period		
FEC ID number of contributing federal political committee.				
Name of Employer Oregon Association of Hos- pitals & Heal	Occupation Vice President, Finance & He	ealth Polic		
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500	0.00		
SUBTOTAL of Receipts This Page (optional)		925.00		
TOTAL This Period (last page this line number	only)			

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 118 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the	Statements may not be sold or used by any person e name and address of any political committee to so	for the purpose of soliciting contributions olicit contributions from such committee.
NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Randall L. Mee		Date of Receipt
Mailing Address 1601 Southeast Cour		12 28 2010
City Pendleton	State Zip Code OR 97801-3217	Transaction ID: 18800422  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Anthony Hospital	Occupation President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Thomas Russell		Date of Receipt
Mailing Address 9670 SE 257 Ave		12 28 2010
City	State Zip Code	Transaction ID: 18800423
Damascus FEC ID number of contributing federal political committee.	OR 97089-6353	Amount of Each Receipt this Period 500.00
Name of Employer Adventist Medical Center	Occupation President	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼  770.00	
Full Name (Last, First, Middle Initial) Mr Henry D Lipman		Date of Receipt
Mailing Address 179 Sara Circle		12 28 2010
City	State Zip Code	Transaction ID: 18800428
Laconia  FEC ID number of contributing federal political committee.	NH 03246-3069	Amount of Each Receipt this Period 500.00
Name of Employer LRGHealthcare	Occupation Executive Vice President and Chief Fin	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
		1500.00

I	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 119 / 208 (check only one)    X
_	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may name and add	y not be sold or used by any persondress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	American Hospital Association PAC			
Δ.	Full Name (Last, First, Middle Initial)  Ms. Ginny Brown  Mailing Address 7335 East Orchard Roa	ad		Date of Receipt
	Suite 100	au 		12 28 2010
	City	State	Zip Code	Transaction ID: 18800429
	Greenwood Village	CO	80111-2512	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		140.00
	Name of Employer Colorado Hospital Associa- tion	Occupatio VP of Le	n gislative & Regulatory Affair	S
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		245.00	
- В.	Full Name (Last, First, Middle Initial) Mr Michael J Curran			Date of Receipt
	Mailing Address 3551 Cattail Creek Driv	/e		12 28 7 2010
	City	State	Zip Code	Transaction ID: 18800454
	Glenwood	MD	21738-9607	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		255.00
	Name of Employer MedStar Health	Occupatio Executive	n e Vice President and CFO	
	Receipt For:  Primary General	Aggregate	e Year-to-Date ▼	
	Other (specify) ▼		255.00	
- C.	Full Name (Last, First, Middle Initial) Mr. Oliver M Johnson, II			Date of Receipt
	Mailing Address 14717 Dover Rd			12 28 2010
	City	State	Zip Code	Transaction ID: 18800457
	Reisterstown	MD	21136-3813	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		255.00
	Name of Employer Georgetown University Hos- pital	Occupatio Senior V	n ice President and General C	oun
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 255.00	
	SUBTOTAL of Receipts This Page (optional)			650.00
	TOTAL This Period (last page this line number of		<u> </u>	

	EDULE A (FEC Form 3X) IIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 120 / 208 (check only one)    X
or for co	ormation copied from such Reports and Stommercial purposes, other than using the ME OF COMMITTEE (In Full)	tatements may name and add	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\	erican Hospital Association PAC			
<b>4.</b> <u>Mr. I</u>	Name (Last, First, Middle Initial) Kenneth A Samet ing Address 8820 Burdette Road			Date of Receipt
City		State	Zip Code	1 2 2 8 2 0 1 0 Transaction ID: 18800463
-	hesda	MD	20817-2807	Amount of Each Receipt this Period
FEC	ID number of contributing paral political committee.	С		510.00
Nam Med	ne of Employer IStar Health	Occupation Presiden	n t and Chief Executive Office	 r
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 510.00	
<b>B.</b> Ms.	Name (Last, First, Middle Initial) Diane S. Schindelar ing Address 2321 Kings Arms Dr			Date of Receipt
	Ing Anna Di			12 28 2010
City		State	Zip Code	Transaction ID: 18800464
<u>Fall</u>	Iston	MD	21047-1248	Amount of Each Receipt this Period
	CID number of contributing ral political committee.	C		375.00
Med	ne of Employer IStar Health	r'	sident, Auxillary	
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 375.00	
	Name (Last, First, Middle Initial) Christine Swearingen			Date of Receipt
	ing Address 3022 Chestnut Street,			12 28 2010
City	shington	State DC	Zip Code 20015-1408	Transaction ID: 18800465
FEC	CID number of contributing ral political committee.	C	20013-1400	Amount of Each Receipt this Period  255.00
Nam Med	ne of Employer IStar Health	Occupation Executive		
Rec	eipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 255.00	
SUBT	OTAL of Receipts This Page (optional)		<b>\</b>	1140.00
TOTA	L This Period (last page this line number	only)		

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 121 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements mand add	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
<b>∠</b> <b>A.</b>	Full Name (Last, First, Middle Initial)  Mr. Eric R. Wagner  Mailing Address 711 E. Timber Branch	Parkway		Date of Receipt
	City	State	Zip Code	1 2 2 8 2 0 1 0 Transaction ID: 18800466
	Alexandria  FEC ID number of contributing federal political committee.	C	22302-3619	Amount of Each Receipt this Period 255.00
	Name of Employer MedStar Health  Receipt For: Primary General		e Vice President for External e Year-to-Date ▼	1
- B.	Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. James Angle	0 0	255.00	Date of Receipt
J.	Mailing Address 1176 Lake Point Cove			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State	Zip Code	Transaction ID: 18801005
	Pittsgrove  FEC ID number of contributing federal political committee.	NJ C	08318-9184	Amount of Each Receipt this Period  250.00
	Name of Employer Memorial Hospital of Salem County	Occupatio CEO		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	]
- C.	Full Name (Last, First, Middle Initial) Mr. Thomas J. Senker, Sr., FACHE Mailing Address 92 Maple Parkway			Date of Receipt
	Mailing Address 92 Maple Parkway			12 24 2010
	City	State	Zip Code	Transaction ID: 18801065
	Sparta  FEC ID number of contributing federal political committee.	NJ C	07871-2011	Amount of Each Receipt this Period  250.00
	Name of Employer Newton Memorial Hospital	Occupatio Presiden	n t and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)			755.00
Ī	TOTAL This Period (last page this line number of	anly)		

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 122 / 208 (check only one)    X
A OI	ny information copied from such Reports and S for commercial purposes, other than using the	Statements may e name and add	not be sold or used by any pers ress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
۸.	Full Name (Last, First, Middle Initial) Mr. Raymond P. Vara			Date of Receipt
	Mailing Address 98-1079 Moanalua Ro	oad		12 28 2010
	City Aiea	State HI	Zip Code 96701-4713	Transaction ID: 18801631
	FEC ID number of contributing federal political committee.	C	30/01-47/13	Amount of Each Receipt this Period  350.00
	Name of Employer Kapiolani Medical Center at Pali Momi	Occupation Chief Exe	cutive Officer	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
-	Full Name (Last, First, Middle Initial) Mr. Brian Brezosky			Date of Receipt
	Mailing Address Post Office Box 43662	20		12 28 2010
	City	State	Zip Code	Transaction ID: 18802011
	Louisville  FEC ID number of contributing federal political committee.	C	40253-6620	Amount of Each Receipt this Period  550.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation Senior Vi	ce President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
_	Full Name (Last, First, Middle Initial) Ms. Elizabeth G. Cobb			Date of Receipt
	Mailing Address P.O. Box 436629			12 28 YYYY 12 28 2010
	City	State	Zip Code	Transaction ID: 18802012
	Louisville FEC ID number of contributing federal political committee.	C	40205-3033	Amount of Each Receipt this Period  550.00
	Name of Employer Kentucky Hospital Associa- tion	Occupation Director of	n of Health Policy	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Γ,	SUBTOTAL of Receipts This Page (optional)			1450.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	ν)	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE   123 / 208   (check only one)
Any information copied from such Reports an or for commercial purposes, other than using	nd Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		areas or any pointed committee to	
Full Name (Last, First, Middle Initial) Ms. Kim J. Dees			Date of Receipt
Mailing Address 2501 Nelson Miller Post Office Box 436	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
City Louisville	State KY	Zip Code 40223-2221	Transaction ID: 18802014  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	TOLLO LLE I	550.00
Name of Employer Kentucky Hospital Associa- tion	Occupatio Executive	n e Dir, Center for Health Care	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Ms. Paige Franklin	Date of Receipt		
Mailing Address 404 Kaelin Drive			12 28 2010
City	State	Zip Code	Transaction ID: 18802039
Louisville FEC ID number of contributing federal political committee.	C	40207-2204	Amount of Each Receipt this Period  550.00
Name of Employer Kentucky Hospital Associa- tion	Occupatio Vice Pres	n sident, Information Services	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial)			Date of Receipt
Ms. Nancy C. Galvagni Mailing Address 2501 Nelson Miller Parkway			12 28 2010
City Louisville	State KY	Zip Code 40253	Transaction ID: 18802040  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	70200	550.00
Name of Employer Kentucky Hospital Associa- tion	<del>- ' '</del>	ice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 550.00	
SUBTOTAL of Receipts This Page (optiona	1)		1650.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	,	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using t	Statements may	not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions oscilcit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Mr. Stephen P. Miller			Date of Receipt
Mailing Address 1101 Cardinal Drive	M M / D D / Y Y Y Y Y 1 Y 1 1 2 2 8 2 0 1 0		
City	State	Zip Code	Transaction ID: 18802043
Louisville	KY	40253-6629	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		550.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Vice Pres		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Ms. Sarah S. Nicholson	Date of Receipt		
Mailing Address 2501 Nelson Miller Parkway			12 28 2010
City	State	Zip Code	Transaction ID: 18802073
Louisville	KY	40223-2221	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		550.00
Name of Employer Kentucky Hospital Associa- tion	Occupation Vice Pres	n sident, Government Relation	is
Receipt For:	Aggregate	Year-to-Date <b>V</b>	
Primary General Other (specify) ▼		550.00	
Full Name (Last, First, Middle Initial) Ms. Debbie Riley			Date of Receipt
Mailing Address 502 Trotwood Place	12 28 2010		
City	State KY	Zip Code	Transaction ID: 18802075
Louisville	- K I	40245-4071	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		550.00
Name of Employer Kentucky Hospital Associa- tion	_, '	ancial Officer	
Receipt For:  Primary General	Aggregate	Year-to-Date ▼	,
Other (specify)		550.00	]
	1		1650.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 125 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAG	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Carol J. Walters  Mailing Address Post Office Box 436		Date of Receipt
City Louisville	State Zip Code KY 40253-6629	Transaction ID: 18802076  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	550.00
Name of Employer Kentucky Hospital Association Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Occupation Vice President  Aggregate Year-to-Date  550.00	
Full Name (Last, First, Middle Initial) Mr. Charles J. Warnick Mailing Address 120 Hillitop Meador	N	Date of Receipt  1 2 2 8 2 0 1 0
City	State Zip Code	Transaction ID: 18802077
Frankfort  FEC ID number of contributing federal political committee.	KY 46001	Amount of Each Receipt this Period 550.00
Name of Employer Baptist Hospital East	Occupation Director of Planning	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	
Full Name (Last, First, Middle Initial) Ms. Eva C. LaBarge		Date of Receipt
Mailing Address 6434 Sun Flag Ct.		12 29 2010
City	State Zip Code	Transaction ID: 18802585
Sparks FEC ID number of contributing federal political committee.	NV 89436-5400	Amount of Each Receipt this Period 500.00
Name of Employer Nevada Hospital Associati- on	Occupation Vice President of Operations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
	ı	1600.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 126 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
4	Any information copied from such Reports and Sor for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
A.	Full Name (Last, First, Middle Initial) Mr. Glen Marshall		Date of Receipt
	Mailing Address 300 Elliott Avenue We	st	12 28 7 2010
	City Seattle	State Zip Code WA 98119-4198	Transaction ID: 18805753
	FEC ID number of contributing federal political committee.	C 30113-4130	Amount of Each Receipt this Period  25.00
	Name of Employer Kennewick General Hospital	Occupation Chief Executive Officer	
	Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 275.00	
– В.	Full Name (Last, First, Middle Initial) Ms. Carol Aaron	Date of Receipt	
	Mailing Address 14432 SE Eastgate W	ay, Suite 300	12 28 2010
	City	State Zip Code	Transaction ID: 18805754
	Bellevue FEC ID number of contributing federal political committee.	WA 98007-6493	Amount of Each Receipt this Period  250.00
	Name of Employer PeaceHealth	Occupation Senior Vice President, Culture & Peo	pl
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
_ С.	Full Name (Last, First, Middle Initial) Mr. Meta Dooley		Date of Receipt
	Mailing Address 38628 108th Avenue S	E	12 28 2010
	City Auburn	State Zip Code WA	Transaction ID: 18805755  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	250.00
	Name of Employer MultiCare Health System	Occupation Vice President, Strategy	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
	SUBTOTAL of Receipts This Page (optional)		525.00
r	TOTAL This Period (last page this line number	·	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 127 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Elaine Dunda  Mailing Address 3394 Hampton Way  City  Eugene  FEC ID number of contributing federal political committee.  Name of Employer PeaceHealth  Receipt For:  Primary  Other (specify)	State Zip Code OR 97401-7085  C  Occupation System VP, Quality and Patient Safet Aggregate Year-to-Date  250.00	Date of Receipt  M M M / 28 2010  Transaction ID: 18805756  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr. Gerard Fischer  Mailing Address 5909 West Pima Court  City  Spokane  FEC ID number of contributing federal political committee.  Name of Employer Providence Sacred Heart Medical Center  Receipt For:  Primary  General  Other (specify)	State Zip Code WA 99208-9010  C  Occupation Vice President- Systems Developmen Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Patti Imhoff  Mailing Address 2901 Squalicum Parkv  City  Bellingham  FEC ID number of contributing federal political committee.  Name of Employer St. Joseph Hospital  Receipt For:  Primary  General  Other (specify)	State Zip Code WA 98225-1851  C  Occupation Trustee  Aggregate Year-to-Date ▼	Date of Receipt  M M Z Z B Z D 1 0  Transaction ID: 18805758  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (optional)		750.00

SCHEDULE A (FEC Form STEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 128 / 208 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than us  NAME OF COMMITTEE (In Full)  American Hospital Association P	and Statements may not be sold or used by any persoring the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr Andrew Jacobs Mailing Address 1100 Ninth Avenual Seattle  FEC ID number of contributing federal political committee.  Name of Employer Virginia Mason Medical Center Receipt For: Primary General Other (specify)	State Zip Code WA 98101-2756  C  Occupation Chief Medical Officer  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 8 / 2 0 1 0  Transaction ID: 18805759  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Ms. Jodi Joyce Mailing Address 2211 NE 139th S  City Vancouver  FEC ID number of contributing federal political committee.  Name of Employer Legacy Salmon Creek Hospital Receipt For: Primary General Other (specify)	State Zip Code WA 98686-2742  C  Occupation Vice President Quality and Patient Sat  Aggregate Year-to-Date  250.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 8 / 2 0 1 0  Transaction ID: 18805760  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr. David Schultz  Mailing Address 1035 116th Aven  City  Bellevue  FEC ID number of contributing federal political committee.  Name of Employer Overlake Hospital Medical Center  Receipt For: Primary General Other (specify)	State Zip Code WA 98004-4604  C  Occupation Chief Operating Officer  Aggregate Year-to-Date ▼	Date of Receipt  M M Z 28 Z 2010  Transaction ID: 18805761  Amount of Each Receipt this Period  250.00
SUBTOTAL of Receipts This Page (option	onal)	750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 129 / 208 (check only one)    X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any persone name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Donna Smith Mailing Address P O Box 900  City Seattle  FEC ID number of contributing federal political committee.  Name of Employer Virginia Mason Medical Center Receipt For: Primary General Other (specify)	State Zip Code WA 98111-0900  C  Occupation Vice President & Medical Director Aggregate Year-to-Date  250.00	Date of Receipt  M M / 28 / 2010  Transaction ID: 18805762  Amount of Each Receipt this Period  250.00
Full Name (Last, First, Middle Initial) Mr Kevin Walstrom Mailing Address North 5633 Lidgerwo City Spokane FEC ID number of contributing federal political committee.		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer PeaceHealth  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Financial Officer  Aggregate Year-to-Date ▼  250.00	
Full Name (Last, First, Middle Initial) Mr. Josiah Johnson Mailing Address 1615 Delaware Stree	·	Date of Receipt  1 2 2 8 2 0 1 0
City  Longview  FEC ID number of contributing federal political committee.	State Zip Code WA 98632-2394  C	Transaction ID: 18805764  Amount of Each Receipt this Period  375.00
Name of Employer PeaceHealth  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date ▼  375.00	
SUBTOTAL of Receipts This Page (optional)		875.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 130 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 11
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any pole name and address of any political committee	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. John Fletcher  Mailing Address 506 Second Avenue Suite 1200  City Seattle  FEC ID number of contributing federal political committee.  Name of Employer Providence Health & Services Receipt For: Primary General Other (specify)	State Zip Code WA 98104-2343  C  Occupation Chief Executive Officer  Aggregate Year-to-Date  1000.00	Date of Receipt  1 2 2 8 2 0 1 0  Transaction ID: 18805765  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Mr. Gary Kaplan Mailing Address 1100 Ninth Avenue  City Seattle  FEC ID number of contributing federal political committee.  Name of Employer Virginia Mason Medical Center Receipt For: Primary General Other (specify)	State Zip Code WA 98101-2799  C  Occupation Chief Executive Officer  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Bob Malte Mailing Address 12040 NE 128th Stre  City Kirkland  FEC ID number of contributing federal political committee.  Name of Employer Evergreen Healthcare  Receipt For: Primary General Other (specify)	State Zip Code WA 98034-3013  C  Occupation Chief Executive Officer  Aggregate Year-to-Date   500.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1500.00

SCHEDULE A (FEC Form	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 131 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Report or for commercial purposes, other than NAME OF COMMITTEE (In Full)	orts and Statements may not be sold or used by any persolusing the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association	PAC	
Full Name (Last, First, Middle Initial) Mr. Thomas Crawford		Date of Receipt
Mailing Address 700 Forest Dri  City	ve State Zip Code	12 30 2010
Frankfort	IN 46041-0669	Transaction ID: 18809417  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer St. Vincent Frankfort Hos- pital	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	250.00	
Full Name (Last, First, Middle Initial) Mr. James L Brexler		Date of Receipt
Mailing Address 975 East Third	Street	12 30 2010
City	State Zip Code	Transaction ID: 18809433
Chattanooga	TN 37403-2163	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Erlanger Medical Center	Occupation President and Chief Executive Officer	<u>,                                     </u>
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	500.00	
Full Name (Last, First, Middle Initial) Mr. Lawrence Kloess		Date of Receipt
Mailing Address 110 Winners C 1st Floor	Circle	12 30 7 2010
City	State Zip Code	Transaction ID: 18809434
Brentwood	TN 37027-5070	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer HCA/TriStar Health System	Occupation President	
Receipt For: Primary General	Aggregate Year-to-Date ▼	,
Other (specify)	250.00	
SUBTOTAL of Receipts This Page (o	ptional)	1000.00
	e number only)	

CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 132 / 208 (check only one)  X 11a 11b 11c 12
ny information copied from such Reports and State for commercial purposes, other than using the national NAME OF COMMITTEE (In Full)	ements may not be sold or used by any person me and address of any political committee to s	1 for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Eugene A. Woods		Date of Receipt
Mailing Address One St. Joseph Drive  City	State Zip Code	1 2 3 0 2 0 1 0  Transaction ID: 18809441
Lexington	KY 40504	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Coint Issanh L'agnital	Occupation President & CEO, St. Joseph's System	<del>-</del> 1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Ms. Lynn Detterman Mailing Address 3883 SR 162		Date of Receipt
Mailing Address 3883 SR 162		12 28 2010
City	State Zip Code	Transaction ID: 18812616
Willard	OH 44890	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Morey Heggital of Millard	Occupation Chief Executive Officer	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	
Full Name (Last, First, Middle Initial) Mr. R. Reed Fraley		Date of Receipt
Mailing Address 257 Clouse Lane		12 28 7 2010
City	State Zip Code	Transaction ID: 18812617
Granville	OH 43023-1428	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	200.00
Ohio Hospital Association	Occupation Senior Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	
SUBTOTAL of Receipts This Page (optional)	<b>&gt;</b>	1050.00
SUBTOTAL of Receipts This Page (optional)  FOTAL This Period (last page this line number only		

SCHEDULE A (FEC Form ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 133 / 208 (check only one)    X
Any information copied from such Report or for commercial purposes, other than to NAME OF COMMITTEE (In Full)  American Hospital Association	ts and Statements may not be sold or used by any persor using the name and address of any political committee to see PAC	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Ms. Barbara J. Petee		Date of Receipt
Mailing Address 4621 Beaconsf  City	State Zip Code	1 2 2 8 2 0 1 0  Transaction ID: 18812618
Toledo FEC ID number of contributing federal political committee.	OH 43623-3205	Amount of Each Receipt this Period 350.00
Name of Employer ProMedica Health System Receipt For:	Occupation Vice President, Government Relations Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	600.00	
Full Name (Last, First, Middle Initial) Dr. Jeffrey L. Sunshine Mailing Address 2711 Emerson	Dr	Date of Receipt  1 2 2 8 2 0 1 0
City	State Zip Code	Transaction ID: 18812619
Pepper Pike	OH 44124-4801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer University Hospital	Occupation VP & Chief Medical Information	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Jonathan Archey		Date of Receipt
Mailing Address 155 East Broad	Street	12 28 2010
City	State Zip Code	Transaction ID: 18812631
Columbus  FEC ID number of contributing federal political committee.	OH 43215-3626	Amount of Each Receipt this Period  350.00
Name of Employer Ohio Hospital Association	Occupation Federal Relations Director	1
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
SUBTOTAL of Receipts This Page (or	tional)	1200.00

	DULE A (FEC Form 3X) ZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 134 / 208 (check only one)    X
Any inform	nation copied from such Reports and Si	tatements may	not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME	OF COMMITTEE (In Full) ican Hospital Association PAC			
	ame (Last, First, Middle Initial) net L Miller			Date of Receipt
Mailing	Address 11100 Euclid Avenue			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City		State	Zip Code	Transaction ID: 18812632
Cleve	eland	OH	44106-5000	Amount of Each Receipt this Period
	O number of contributing political committee.	C		1000.00
Name Univer	of Employer sity Hospitals	Occupation General		
Receip	ot For:		Year-to-Date ▼	
	Primary General  Other (specify) ▼	0 0	1000.00	]
	ame (Last, First, Middle Initial) chael Farrell			Date of Receipt
Mailing 	Address 4009 Red Bud Avenue			12 28 2010
City		State	Zip Code	Transaction ID: 18812633
<u>Cinci</u>	<u>nnati</u>	OH	45229-1316	Amount of Each Receipt this Period
	O number of contributing political committee.	C		300.00
Name Univer	of Employer sity Hospital	Occupation President	n t, RMBC/MAC Hospital	
Receip		Aggregate	Year-to-Date ▼	
	Primary General  Other (specify) ▼	0 0	300.00	
	ame (Last, First, Middle Initial) nes E. May			Date of Receipt
Mailing	Address 731 Elm Ave.			12 28 7 2010
City		State	Zip Code	Transaction ID: 18812635
<u>Terra</u>	ce Park	OH	45174-1203	Amount of Each Receipt this Period
	O number of contributing political committee.	С		1000.00
<u>SW 0</u>		Occupation Presiden	n t & Chief Executive Officer	
Receip		Aggregate	Year-to-Date ▼	
	Primary	0 0	1000.00	]
	AL of Receipts This Page (optional)	l		2300.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 135 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAG	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Heidi L. Gartland  Mailing Address 7604 Andover Way  City  Hudson  FEC ID number of contributing federal political committee.  Name of Employer University Hospitals	State Zip Code OH 44236-4616  C Occupation Vice President, Government Affairs	Date of Receipt    M M
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
Full Name (Last, First, Middle Initial) Mr. Daniel W. Griess Mailing Address 744 W. 16th St		Date of Receipt  1 2 3 0 2 0 1 0
City  Alliance  FEC ID number of contributing federal political committee.	State         Zip Code           NE         69301-0810	Transaction ID: 18817029  Amount of Each Receipt this Period  250.00
Name of Employer Box Butte General Hospital  Receipt For:  Primary General  Other (specify) ▼	Occupation Chief Executive Officer  Aggregate Year-to-Date   250.00	
Full Name (Last, First, Middle Initial) Mr. Ryan C. Larsen Mailing Address 925 Reavis Street		Date of Receipt  1 2 3 0 2 0 1 0
City Falls City FEC ID number of contributing	State Zip Code NE 68355-3142  C	Transaction ID: 18817061  Amount of Each Receipt this Period  250.00
name of Employer Community Medical Center	Occupation CEO	_
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	l) <b>&gt;</b>	750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 136 / 208 (check only one)  X 11a 11b 11c 12
Any information copied from such Reports ar or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)	nd Statements may not be sold or used by any perso the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC	2	
Full Name (Last, First, Middle Initial) Mr. Gary A. Perkins  Mailing Address 22621 Homestead	Rd	Date of Receipt
City	State Zip Code	1 2 3 0 2 0 1 0 Transaction ID: 18817074
Elkhorn  FEC ID number of contributing federal political committee.	NE 68022-2412	Amount of Each Receipt this Period  250.00
Name of Employer Children's Hospital and Medical Center Receipt For:  Primary General Other (specify) ▼	Occupation President and Chief Executive Officer Aggregate Year-to-Date  250.00	
Full Name (Last, First, Middle Initial)  Mr. Michael H. Schnieders  Mailing Address P.O. Box 1990		Date of Receipt    M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: 18817160
Kearney  FEC ID number of contributing federal political committee.	NE 68848-1990	Amount of Each Receipt this Period  250.00
Name of Employer Good Samaritan Hospital	Occupation President/CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Mr. James J. Sinek		Date of Receipt
Mailing Address 2000 Elmers Lane		12 30 YYYYY 2010
City <u>Norfolk</u>	State Zip Code NE 68701-2076	Transaction ID: 18817178  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	250.00
Name of Employer Faith Regional Health Ser- vices	Occupation President and Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optional	ıl)	750.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 137 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Thomas L. Bell Mailing Address 4301 NW Valley Road City Topeka FEC ID number of contributing federal political committee.  Name of Employer Kansas Hospital Association Receipt For:	State Zip Code KS 66618-3445  C Occupation President  Aggregate Year-to-Date	Date of Receipt  1 2 3 0 2 0 1 0  Transaction ID: 18818809  Amount of Each Receipt this Period  67.30
Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr. Randall R Cason, , FACHE	1307.47	Date of Receipt
Mailing Address 1102 East Centennial  City	State Zip Code	12 30 2010 Transaction ID: 18818810
Pittsburg  FEC ID number of contributing federal political committee.	KS 66762-6643	Amount of Each Receipt this Period  302.50
Name of Employer Via Christi Hospital  Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President and Chief Executive Office  Aggregate Year-to-Date   495.00	ır
Full Name (Last, First, Middle Initial) Ms. Melissa Levy Hungerford		Date of Receipt
Mailing Address 6448 SW Bayshore Di	r State Zip Code	1 2 3 0 2 0 1 0 Transaction ID: 18818811
Auburn FEC ID number of contributing federal political committee.	KS 66402-9324	Amount of Each Receipt this Period 67.30
Name of Employer Kansas Hospital Association Receipt For:  Primary General Other (specify) ▼	Occupation Sr. Vice President  Aggregate Year-to-Date   307.67	
	1	437.10

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 138 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Fred J. Lucky Mailing Address 14607 W 89  City Lenexa  FEC ID number of contributing federal political committee.  Name of Employer Kansas Hospital Association Receipt For: Primary General Other (specify)	State Zip Code KS 66215-2967  C  Occupation Senior Vice President Aggregate Year-to-Date  703.90	Date of Receipt  1 2 3 0 2 0 1 0  Transaction ID: 18818813  Amount of Each Receipt this Period  151.45
Full Name (Last, First, Middle Initial) Mr. Robert T. Meling Mailing Address 13005 Catalina Street  City Leawood  FEC ID number of contributing federal political committee.  Name of Employer Associated Purchasing Services Corpora Receipt For: Primary General Other (specify)	State Zip Code KS 66209-2392  C Occupation Senior Vice President Aggregate Year-to-Date  307.69	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Blake A Dye Mailing Address 2805 W. CR 250 S.  City New Castle  FEC ID number of contributing federal political committee.  Name of Employer Henry County Hospital  Receipt For: Primary General Other (specify)	State Zip Code IN 47362  C  Occupation President and CEO  Aggregate Year-to-Date   1000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 1 0  Transaction ID: 18819156  Amount of Each Receipt this Period  500.00
SUBTOTAL of Receipts This Page (optional)		718.76

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 139 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
Any information copied from such Reports ar or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PAC	nd Statements may not be sold or used by any person the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Spencer L. Grover Mailing Address 3636 Emily Way  City Carmel  FEC ID number of contributing federal political committee.  Name of Employer Indiana Hospital Association Receipt For: Primary General	State Zip Code IN 46033-4442  C Occupation Vice President  Aggregate Year-to-Date ▼	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr. Douglas J Leonard Mailing Address 2574 Califorinia Str  City Columbus  FEC ID number of contributing federal political committee.	1000.00  eet  State Zip Code IN 47201-3649  C	Date of Receipt    M M M
Name of Employer Indiana Hospital Association Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼  Full Name (Last, First, Middle Initial)	Occupation President  Aggregate Year-to-Date   1500.00	
Mr. Brian Tabor  Mailing Address 10762 Forest Lake  City  Indianapolis  FEC ID number of contributing federal political committee.	Court  State Zip Code IN 46278-9610  C	Date of Receipt    M M
Name of Employer Indiana Hospital Association Receipt For: Primary General Other (specify)	Occupation Vice President  Aggregate Year-to-Date   1000.00	
SUBTOTAL of Receipts This Page (optional	I) <b>&gt;</b>	1500.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 140 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
or for commercial purposes, other than using	and Statements may not be sold or used by any person g the name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PA	C	
Full Name (Last, First, Middle Initial)  Mr. David H. Wiesman  Mailing Address 4521 Hickory Grov	o Dha	Date of Receipt
	е ыча.	12 30 2010
City	State Zip Code	Transaction ID: 18819160
Greenwood	IN 46143-7448	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Indiana Hospital Associat- ion	Occupation Vice President	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. Matthew D. Bailey, , FACHE		Date of Receipt
Mailing Address 665 Ironwood Driv		12 30 7 2010
City	State Zip Code	Transaction ID: 18819161
Avon	IN 46123-9458	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Clarian West Medical Cent- er	Occupation President & CEO	
Receipt For: Primary General	Aggregate Year-to-Date ▼	,
Other (specify) ▼	1000.00	
Full Name (Last, First, Middle Initial) Mr. Vincent C. Caponi		Date of Receipt
Mailing Address 8166 Darnley Cou		12 30 7 2010
City	State Zip Code	Transaction ID: 18819162
Indianapolis	IN 46260-2906	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer St. Vincent Health	Occupation CEO	
Receipt For: Primary General	Aggregate Year-to-Date ▼ 1000.00	1
Other (specify) ▼	1000.00	
SUBTOTAL of Receipts This Page (option	al)	1500.00
	nber only)	

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 141 / 208 (check only one)    X
A	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may e name and add	y not be sold or used by any pers dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
<b>A</b> .	Full Name (Last, First, Middle Initial) Mr. Bradford W Dykes			Date of Receipt
	Mailing Address 104 Windamere Circle	<del></del>		12 / 30 / 2010
	City Bedford	State IN	Zip Code 47421-9604	Transaction ID: 18819163  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	111111111	500.00
	Name of Employer Bedford Regional Medical Center	Occupatio Presiden	n t and CEO	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1000.00	
В.	Full Name (Last, First, Middle Initial) Mr. Gregory W Lintjer	1		Date of Receipt
	Mailing Address 53308 Monticola Lane			12 30 2010
	City Bristol	State IN	Zip Code	Transaction ID: 18819164
	FEC ID number of contributing federal political committee.	C	46507-9692	Amount of Each Receipt this Period 500.00
	Name of Employer Elkhart General Healthcare System	Occupatio Presiden		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 1000.00	
— D.	Full Name (Last, First, Middle Initial) Ms. Linda E. White			Date of Receipt
	Mailing Address 5505 Timberlake Cour	1		12 30 YYYYY 12 30 2010
	City	State IN	Zip Code	Transaction ID: 18819165
	Evansville  FEC ID number of contributing federal political committee.	C	47710-4134	Amount of Each Receipt this Period 500.00
	Name of Employer Deaconess Health System	Occupatio Presiden	n t and CEO	
	Receipt For:  Primary General  Other (specify) ▼	<del>, '</del>	e Year-to-Date ▼ 1000.00	
	SUBTOTAL of Receipts This Page (optional)		I	1500.00
	OTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 142 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Dennis W Dawes, , FACHE Mailing Address 36 Brandywine Court  City Brownsburg  FEC ID number of contributing federal political committee.  Name of Employer Hendricks Regional Health  Receipt For:  Primary General Other (specify)	State Zip Code IN 46112-1076  C  Occupation President  Aggregate Year-to-Date  1000.00	Date of Receipt  1 2 3 0 2 0 1 0  Transaction ID: 18819166  Amount of Each Receipt this Period  500.00
Full Name (Last, First, Middle Initial) Ms. Katherine Humphreys  Mailing Address 502 N. Ironwood Drive  City South Bend  FEC ID number of contributing federal political committee.  Name of Employer St. Vincent Health  Receipt For: Primary General Other (specify)	State Zip Code IN 46615-3206  C  Occupation Senior VP Advocacy  Aggregate Year-to-Date  700.00	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr Trent Green  Mailing Address 2211 Northeast 139th S  City Vancouver  FEC ID number of contributing federal political committee.  Name of Employer Legacy Health System  Receipt For: Primary General Other (specify)	State Zip Code WA 98686-2742  C Occupation Senior VP Aggregate Year-to-Date  350.00	Date of Receipt  12 28 2010  Transaction ID: 18819260  Amount of Each Receipt this Period  100.00
SUBTOTAL of Receipts This Page (optional)		800.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 143 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dr. George J Brown, , M.D.  Mailing Address 1919 NW Lovejoy Structure City Portland  FEC ID number of contributing federal political committee.  Name of Employer Legacy Salmon Creek Hospital Receipt For: Primary General Other (specify)	State Zip Code OR 97209-1503  C  Occupation President and Chief Executive Office  Aggregate Year-to-Date  250.00	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Ms. Sonja Steves Mailing Address 19300 SW 65th Avenu  City Portland  FEC ID number of contributing federal political committee.  Name of Employer Legacy Salmon Creek Hospital	State Zip Code OR 97062-9741  C Occupation Vice President Human Resources an	Date of Receipt    M M M
Receipt For: Primary General Other (specify)  Full Name (Last, First, Middle Initial) Mr Daniel E Baker Mailing Address 800 NE Glen Oak Ave		Date of Receipt  1 2 2 8 2 0 1 0
City Peoria  FEC ID number of contributing federal political committee.	State         Zip Code           IL         61603-3200	Transaction ID: 18824269  Amount of Each Receipt this Period  800.00
Name of Employer OSF Healthcare System  Receipt For:  Primary General Other (specify) ▼	Occupation Chief Financial Officer  Aggregate Year-to-Date   800.00	
SUBTOTAL of Receipts This Page (optional) .		1050.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 144 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
7	Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
∠ <b>4</b> .	Full Name (Last, First, Middle Initial) Mr Robert Christie	•		Date of Receipt
	Suite 1750			12 28 2010
	City <u>Chicago</u>	State IL	Zip Code 60611-3245	Transaction ID: 18824271  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	00011 02-10	400.00
	Name of Employer Northwestern Memorial Hos- pital		sident, External Affairs	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	]
	Full Name (Last, First, Middle Initial) Mr. Brad Copple			Date of Receipt
	Mailing Address 11 East Pleasant Avenu	12 28 2010		
	City	State	Zip Code	Transaction ID: 18824272
	Sandwich  FEC ID number of contributing federal political committee.	C	60548-1100	Amount of Each Receipt this Period 400.00
	Name of Employer Valley West Community Hos- pital	Occupation Administ		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 400.00	]
	Full Name (Last, First, Middle Initial) Mr. Dean M Harrison			Date of Receipt
	Mailing Address 251 East Huron Street			12 28 YYYY 12 28 2010
	City	State	Zip Code	Transaction ID: 18824287
	Chicago FEC ID number of contributing		60611-2908	Amount of Each Receipt this Period
	federal political committee.	C		800.00
	Name of Employer Northwestern Memorial Hos- pital		t and Chief Executive Office	r
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 800.00	
	SUBTOTAL of Receipts This Page (optional)			1600.00
T	TOTAL This Period (last page this line number of	only)		

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 145 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
Any information copied from such Reports a or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Hospital Association PA	and Statements may not be sold or used by any persong the name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Michelle Janney  Mailing Address 1620 Meadow Lan  City	State Zip Code	Date of Receipt    M M
Glenview FEC ID number of contributing federal political committee.	IL 60025-2350	Amount of Each Receipt this Period 400.00
Name of Employer Northwestern Memorial Hospital Receipt For:  Primary  General  Other (specify) ▼	Occupation Sr. VP/Chief Nurse Executive  Aggregate Year-to-Date   400.00	
Full Name (Last, First, Middle Initial) Mr. Dennis Murphy Mailing Address 48 Royal Vale Driv	re	Date of Receipt  1 2 2 8 2 0 1 0
City	State Zip Code	Transaction ID: 18824291
Oak Brook	IL 60523-1643	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	400.00
Name of Employer Northwestern Memorial Hos- pital	Occupation Director, Medical Affairs	
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 400.00	
Full Name (Last, First, Middle Initial) Mr. Jeffrey Murphy Mailing Address 355 Ridge Ave		Date of Receipt
		12 28 2010
City Evanston	State Zip Code  IL 60202-3328	Transaction ID: 18824292  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	125.00
Name of Employer Saint Francis Hospital	Occupation CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼  250.00	
	1	925.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 146 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person ne name and address of any political committee to s	for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Mr. Mark R Neaman Mailing Address 1301 Central Street City Evanston	State Zip Code IL 60201-1613	Date of Receipt  1 2 2 8 2 0 1 0  Transaction ID: 18824293  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.  Name of Employer NorthShore University HealthSystem  Receipt For:  □ Primary □ General  Other (specify) ▼	Occupation President and Chief Executive Officer  Aggregate Year-to-Date  800.00	800.00
Full Name (Last, First, Middle Initial) Mr. Larry P Schumacher, , R.N. Mailing Address 2024 S Illini Rdt  City	State Zip Code	Date of Receipt  1 2 2 8 2 0 1 0  Transaction ID: 18824297
Springfield  FEC ID number of contributing federal political committee.  Name of Employer Hospital Sisters Health System  Receipt For:  Primary General  Other (specify)	Occupation President and Chief Executive Officer  Aggregate Year-to-Date   1200.00	Amount of Each Receipt this Period 1200.00
Full Name (Last, First, Middle Initial) Mr. Scott A. Ziomek  Mailing Address 211 E. Ontario Street Suite 1750  City	State Zip Code	Date of Receipt  1 2 2 8 2 0 1 0  Transaction ID: 18824300
Chicago  FEC ID number of contributing federal political committee.	IL 60611-3245	Amount of Each Receipt this Period 400.00
Name of Employer Northwestern Memorial Hos- pital Receipt For:  Primary  General  Other (specify) ▼	Occupation Director, External Affairs  Aggregate Year-to-Date   400.00	_
SUBTOTAL of Receipts This Page (optional)	· · · · · · · · · · · · · · · · · · ·	2400.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 147 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any perse name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial)  Ms. Maureen Nugent  Mailing Address 1586 Regatta Lane  City Reston	State Zip Code VA 20194-1218	Date of Receipt    M   M   D   D   D   D   D   D   D   D
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Inova Health System  Receipt For:  Primary General  Other (specify) ▼	Chief Accounting Officer  Aggregate Year-to-Date ▼  350.00	
Full Name (Last, First, Middle Initial) Mr. David Adams  Mailing Address 1045 Ashland Place		Date of Receipt
City	State Zip Code	Transaction ID: 18824316
Lynchburg	VA 24503-2533	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	350.00
Name of Employer Centra Lynchburg General Hospital	Occupation Vice President	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initial) Mr Richard Banta, Sr		Date of Receipt
Mailing Address 18 Buck Branch Road		12 31 2010
City Richmond	State Zip Code VA 23238-6101	Transaction ID: 18824317  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 23238-0101	350.00
Name of Employer Bon Secours-Richmond Community Hospita Receipt For:  Primary General Other (specify) ▼	Occupation Trustee  Aggregate Year-to-Date ▼  350.00	
	•	1050.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 148 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr David Boim  Mailing Address 13750 Elmstead Road  City Midlothian  FEC ID number of contributing federal political committee.  Name of Employer Bon Secours-Richmond Community Hospita Receipt For: Primary General Other (specify)	State Zip Code VA 23113-4117  C  Occupation Vice President Managed Care Aggregate Year-to-Date  350.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 0 1 0  Transaction ID: 18824318  Amount of Each Receipt this Period  350.00
Full Name (Last, First, Middle Initial) Mr C Stephen Francis  Mailing Address 3615 Apple Pie Ridge  City  Winchester  FEC ID number of contributing federal political committee.  Name of Employer Shenandoah Memorial Hospital Receipt For:  Primary General Other (specify)	State Zip Code VA 22603-2511  C  Occupation Director Rehab Services  Aggregate Year-to-Date  312.50	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Ms. Melissa Smith  Mailing Address 11325 Bright Pond Lat  City  Reston  FEC ID number of contributing federal political committee.  Name of Employer Mary Washington Healthcare  Receipt For:  Primary General Other (specify)	State Zip Code VA 20194-1006  C Occupation Vice President  Aggregate Year-to-Date  350.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		989.58

City State Zip Code Roanoke VA 24033  FEC ID number of contributing federal political committee.    Name of Employer		SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 149 / 208 (check only one)    X   11a
A. Dr. Alce Ackerman, MD  Mailing Address 3905 Piney Ridge RD  City State Zip Code YA 24033  FEC ID number of contributing federal political committee.  Name of Employer Carrier Climic Cinic Receipt Times (Cinic Cinic Cin		or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	tatements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Name of Employer Carillon Clinic  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial) Mr Mark Lawrence Mailing Address 2509 Nottingham Road, SE City State Zip Code Roanoke VA 24014-3409 FEC ID number of contributing federal political committee.  Name of Employer Carillon Clinic  City State Zip Code VA 24014-3409  FEC ID number of contributing federal political committee.  City Governmental and External Affairs Receipt For: Primary General Other (specify) ▼  State Zip Code VP, Governmental and External Affairs Receipt For: Primary General Other (specify) ▼  State Zip Code Transaction ID: 18824322  Amount of Each Receipt this Penod  Date of Receipt  Transaction ID: 18824347  Amount of Each Receipt  Transaction ID: 18824347  Amount of Each Receipt this Penod  Transaction ID: 18824347  Amount of Each Receipt this Penod  EC ID number of contributing federal political committee.  City State Zip Code ID 83201-4071  FEC ID number of contributing federal political committee.  City Cocupation President and Chief Executive Officer Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Occupation President and Chief Executive Officer  Receipt For: Primary General Other (specify) ▼  Aggregate Year-to-Date ▼  Occupation President and Chief Executive Officer  Receipt For: Primary General Other (specify) ▼	∠ <b>A</b> .	Dr. Alice Ackerman, MD  Mailing Address 3905 Piney Ridge RD  City  Roanoke  FEC ID number of contributing	VA	·	Transaction ID: 18824321  Amount of Each Receipt this Period
Mailing Address 2509 Nottingham Road, SE  City State Zip Code YA 24014-3409  FEC ID number of contributing federal political committee.  Name of Employer Carillon Clinic  Primary General Other (specify) ▼  City State Zip Code YA 24014-3409  FEUI Name (Last, First, Middle Initial)  City State Zip Code YA 24014-3409  Full Name (Last, First, Middle Initial)  City State Zip Code YA 350.00  Full Name (Last, First, Middle Initial)  City State Zip Code ID 83201-4071  FEC ID number of contributing federal political committee.  City State Zip Code ID 83201-4071  FEC ID number of contributing federal political committee.  Name of Employer Portneut Medical Center President and Chief Executive Officer  Receipt For: Aggregate Year-to-Date ▼  Occupation President and Chief Executive Officer  Receipt For: Aggregate Year-to-Date ▼  Other (specify) ▼  State Sign Address Officer  Aggregate Year-to-Date ▼  Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  Other (specify) ▼  State Sign Amount of Each Receipt his Period Sign Amount of Each Receipt Sign Amount Sign		Name of Employer Carilion Clinic  Receipt For: Primary General	Departm	ent Chair e Year-to-Date ▼	
City State Zip Code VA 24014-3409  FEC ID number of contributing federal political committee.  C	- 3.	Mr Mark Lawrence	d, SE		M M / D D / Y Y Y Y
Name of Employer Carilion Clinic  Name of Employer Carilion Clinic  Receipt For: Primary General Other (specify) ▼  Full Name (Last, First, Middle Initial)  Mr. Norman F Stephens  Mailing Address 651 Memorial Drive  City Pocatello FEC ID number of contributing federal political committee.  Name of Employer Portneuf Medical Center  Receipt For: Primary General Other (specify) ▼  Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  Transaction ID: 18824347  Amount of Each Receipt this Period  Aggregate Year-to-Date ▼  Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  Occupation President and Chief Executive Officer  Aggregate Year-to-Date ▼  Other (specify) ▼  Aggregate Year-to-Date ▼  State Zip Code Transaction ID: 18824347  Amount of Each Receipt this Period  250.00		•		•	Transaction ID: 18824322
Carillon Clinic  VP, Governmental and External Affairs  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  State Sip Code  ID 83201-4071  FEC ID number of contributing federal political committee.  Name of Employer Portneuf Medical Center  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Date of Receipt  Transaction ID: 18824347  Amount of Each Receipt this Period  250.00  Ccupation President and Chief Executive Officer  Receipt For:  Primary General  Other (specify) ▼  Aggregate Year-to-Date ▼  Sould State Sip Code  Transaction ID: 18824347  Amount of Each Receipt this Period  250.00		federal political committee.	С		350.00
Mailing Address 651 Memorial Drive  City  Pocatello  FEC ID number of contributing federal political committee.  Name of Employer Portneuf Medical Center  Receipt For:  Primary  Other (specify) ▼  Date of Receipt  Transaction ID: 18824347  Amount of Each Receipt this Period  C  C  Aggregate Year-to-Date ▼  500.00		Receipt For: Primary General	VP, Gov	ernmental and External Affai e Year-to-Date ▼	irs
City State Zip Code ID: 18824347  Pocatello ID 83201-4071  FEC ID number of contributing federal political committee.  Name of Employer Portneuf Medical Center  Receipt For:  Primary General Other (specify) ▼  State Zip Code ID: 18824347  Amount of Each Receipt this Period  250.00  Aggregate Year-to-Date ▼  500.00	- :.	Mr. Norman F Stephens			M M / D D / Y Y Y Y
FEC ID number of contributing federal political committee.  Name of Employer Portneuf Medical Center  Receipt For: Primary General Other (specify)  Occupation President and Chief Executive Officer  Aggregate Year-to-Date   500.00		•		Zip Code	
Receipt For: Primary General Other (specify)		FEC ID number of contributing		83201-4071	
Primary General Other (specify) ▼  500.00		Name of Employer Portneuf Medical Center			r
		Primary General	Aggregate		
SUBTOTAL of Receipts This Page (optional)		SUBTOTAL of Receipts This Page (optional)			950.00

ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 150 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person he name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		_
Full Name (Last, First, Middle Initial)  Mr Tom Legel  Mailing Address 2003 Lincoln Way		Date of Receipt
City	State Zip Code	1 2 2 8 2 0 1 0  Transaction ID: 18824348
Coeur D' Alene	ID 83814-2677	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	288.10
Name of Employer Kootenai Medical Center	Occupation Vice President and Chief Financial Of	if
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 288.10	
Full Name (Last, First, Middle Initial) Ms. Toni Lawson		Date of Receipt
Mailing Address P.O. Box 1278		12 28 2010
City	State Zip Code	Transaction ID: 18824349
<u>Boise</u>	ID 83701-1278	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С	401.20
Name of Employer Idaho Hospital Association	Occupation Vice President, Government Affairs	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	401.20	
Full Name (Last, First, Middle Initial) Ms Janie G Nirk		Date of Receipt
Mailing Address 1010 S. Brincken Ro		12 28 2010
City <u>Potlatch</u>	State Zip Code ID 83855-9764	Transaction ID: 18824357
FEC ID number of contributing federal political committee.	C 63633-9764	Amount of Each Receipt this Period  35.50
Name of Employer Gritman Medical Center	Occupation Trustee	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 210.50	
SUPTOTAL of Descripts This Page (optional)		724.80

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	.)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports and or for commercial purposes, other than using	d Statements may	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
Full Name (Last, First, Middle Initial) Ms. Robin Woods			Date of Receipt
Mailing Address 615 Moore St.			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: 18824358
Moscow FEC ID number of contributing federal political committee.	C	83843-3255	Amount of Each Receipt this Period  35.50
Name of Employer Gritman Medical Center	Occupatio Board Me		
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 210.50	
Full Name (Last, First, Middle Initial) Mr. BJ Swanson			Date of Receipt
Mailing Address 1121 Lamb Road			12 28 2010
City Trov	State ID	Zip Code 83871-9619	Transaction ID: 18824362
FEC ID number of contributing federal political committee.	C	03071-9019	Amount of Each Receipt this Period  153.10
Name of Employer Gritman Medical Center	Occupatio Board Ch		
Receipt For:  Primary General  Other (specify) ▼	·	Year-to-Date ▼ 328.10	
Full Name (Last, First, Middle Initial) Mr. Carl Hanson			Date of Receipt
Mailing Address 1224 Eighth Street			1 2 2 8 2 0 1 0
City Rupert	State ID	Zip Code	Transaction ID: 18824364
FEC ID number of contributing federal political committee.	C	83350-1527	Amount of Each Receipt this Period  372.40
Name of Employer Minidoka Memorial Hospital	Occupatio Administ		
Receipt For:  Primary  General  Other (specify) ▼		e Year-to-Date ▼ 402.40	
SUBTOTAL of Receipts This Page (optional	<u> </u>		561.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 152 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Craig A Johnson Mailing Address 6640 Kaniksu Street  City Bonners Ferry  FEC ID number of contributing federal political committee.  Name of Employer Boundary Community Hospital Receipt For: Primary General Other (specify)	State Zip Code ID 83805-7532  C  Occupation Chief Executive Officer and Chief Fine Aggregate Year-to-Date  288.10	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr Dan Cochran  Mailing Address 98 Poplar Street  City Blackfoot  FEC ID number of contributing federal political committee.  Name of Employer Bingham Memorial Hospital  Receipt For: Primary General Other (specify)	State Zip Code ID 83221-1799  C  Occupation Chief Operating Officer  Aggregate Year-to-Date  206.20	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Dan Keller  Mailing Address 194 E Valley View Dr  City Preston  FEC ID number of contributing federal political committee.  Name of Employer Franklin County Medical Center  Receipt For: Primary General Other (specify)	State Zip Code ID 83263-1537  C Occupation Trustee  Aggregate Year-to-Date ▼	Date of Receipt  M M / D D / Y Y Y Y Y  1 2 8 2 0 1 0  Transaction ID: 18824368  Amount of Each Receipt this Period  392.40
SUBTOTAL of Receipts This Page (optional)	•	711.70

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 153 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	tatements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Mr. Jeff Daniels Mailing Address 98 Poplar Street  City Blackfoot FEC ID number of contributing federal political committee.  Name of Employer Bingham Memorial Hospital  Receipt For: Primary General Other (specify)	State Zip Code ID 83221-1758  C  Occupation Chief Financial Officer  Aggregate Year-to-Date  226.20	Date of Receipt    M M
Full Name (Last, First, Middle Initial) Mr. Joseph E Morris Mailing Address 2003 Lincoln Way  City Coeur D Alene  FEC ID number of contributing federal political committee.  Name of Employer Kootenai Medical Center  Receipt For: Primary General Other (specify)	State Zip Code ID 83814-2611  C  Occupation Chief Executive Officer  Aggregate Year-to-Date  246.20	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Mr. Joseph P Caroselli Mailing Address P O Box 1100  City Boise  FEC ID number of contributing federal political committee.  Name of Employer Elks Rehab Hospital  Receipt For: Primary General Other (specify)	State Zip Code ID 83701-1100  C  Occupation Chief Executive Officer  Aggregate Year-to-Date  288.10	Date of Receipt    M   M   28
SUBTOTAL of Receipts This Page (optional)	<b>•</b>	585.50

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 154 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
A	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Hospital Association PAC	atements may not be sold or used by any person name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
<b>A</b> .	Full Name (Last, First, Middle Initial) Ms. Margaret Soulen Hinson  Mailing Address 1824 Jones Road  City Weiser  FEC ID number of contributing federal political committee.  Name of Employer Weiser Memorial Hospital  Receipt For:  Primary General Other (specify)	State Zip Code ID 83672-5536  C Occupation Chairman, Board of Trustees Aggregate Year-to-Date ▼ 613.10	Date of Receipt    M M
<b>—</b> З.	Full Name (Last, First, Middle Initial) Mr. Scott Davis Mailing Address 3524 Catalina Ave  City Caldwell  FEC ID number of contributing federal political committee.  Name of Employer West Valley Medical Center	State Zip Code ID 83605-6717  C Occupation Chief Financial Officer	Date of Receipt    M M
_ C.	Receipt For:  Primary General  Other (specify)   Full Name (Last, First, Middle Initial)  Mr. Steven A. Millard  Mailing Address 2268 E. Shalimar Dr  City	Aggregate Year-to-Date ▼  392.40  State Zip Code	Date of Receipt    M
	Eagle  FEC ID number of contributing federal political committee.  Name of Employer Idaho Hospital Association  Receipt For:  Primary General	ID 83616-6608  C  Occupation President  Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
	Other (specify) ▼  SUBTOTAL of Receipts This Page (optional)	613.10	618.60

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 155 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any personal statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
/		
Full Name (Last, First, Middle Initial) Mr. Winston Yeast		Date of Receipt
Mailing Address PO Box 574		12 28 2010
City	State Zip Code	Transaction ID: 18824410
McCall	ID 83638-0574	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	339.30
Name of Employer McCall Memorial Hospital	Occupation Trustee	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	339.30	
Full Name (Last, First, Middle Initial) Mr. John H Tobin	1	Date of Receipt
Mailing Address 64 Robbins Street		12 02 YYYY 12 02 2010
City	State Zip Code	Transaction ID: 18885940
Waterbury	CT 06708-2600	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	0.00
Name of Employer Waterbury Hospital	Occupation President and Chief Executive Office	r
Receipt For:	Aggregate Year-to-Date ▼	[MEMO ITEM]
Primary General Other (specify) ▼	500.00	Refund(s) on Schedule B Totaling \$500.00 This changes the YTD Total to \$50- 0.00
Full Name (Last, First, Middle Initial) Ms. Katie Vaughan	1	Date of Receipt
Mailing Address 506A East Howell Ave	enue	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR1034595124682
Alexandria	VA 22301-1216	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Associate Director	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
SUPTOTAL of Possints This Page (ontional)		379.30

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 156 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions a solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Melinda Reid Hatton		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2010
City	State Zip Code	Transaction ID: PR1045726224682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa-	Occupation	
tion-Washingt Receipt For:	Senior Vice President & General Cou Aggregate Year-to-Date ▼	
Primary General		P/R Deduction (\$40.00 Bi-
Other (specify) ▼	1000.00	Weekly)
Full Name (Last, First, Middle Initial) Mr. David Schulke		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	12 31 Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR1057462124682
Washington	DC 20004-2801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	117.70
Name of Employer American Hospital Associa-	Occupation	
tion-Washingt	VP Research Programs	
Receipt For: Primary General	Aggregate Year-to-Date ▼	
Other (specify)	1000.00	P/R Deduction (\$58.82 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sarah Berk		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	M M / D D / Y Y Y Y Y Y 1 1 2 3 1 2 0 1 0
City	State Zip Code	Transaction ID: PR1082532724682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa-	Occupation Senior Associate Director	7
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	$\dashv$
Primary General		P/R Deduction (\$14.00 Bi-
Other (specify) ▼	350.00	Weekly)
SURTOTAL of Receipts This Page (optional)		225.70

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 157 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be sold or used by any person name and address of any political committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Barbara Jellen		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 31 2010
	City <u>Washington</u>	State         Zip Code           DC         20004-2818	Transaction ID: PR1113464224682 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General	Occupation Section Director, Constituency Section Aggregate Year-to-Date ▼	P/R Deduction (\$14.00 Bi-
_	Other (specify)	350.00	Weekly)
•	Full Name (Last, First, Middle Initial)  Ms. Lisa Allen  Mailing Address One North Franklin		Date of Receipt
	City	State Zip Code	1 2 3 1 2 0 1 0 Transaction ID: PR1118928224682
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	41.30
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Sr. Vice President, Chief Human Reso	ur
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$20.58 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Mary Meadows		Date of Receipt
	Mailing Address One North Franklin		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR1260472924682
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Director of Professional Practice, AON Aggregate Year-to-Date ▼	
	Primary ☐ General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		97.30

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 158 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 17
	Any information copied from such Reports and St or for commercial purposes, other than using the	tatements may	y not be sold or used by any persodress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
∠ 4.	Full Name (Last, First, Middle Initial) Ms. Elizabeth Baskett			Date of Receipt
	Mailing Address 325 Seventh Street, NV	N		12 31 2010
	City	State	Zip Code	Transaction ID: PR1332167424682
	Washington  FEC ID number of contributing federal political committee.	C	20004-2802	Amount of Each Receipt this Period  31.82
	Name of Employer American Hospital Associa-	Occupation	n	
	tion-Washingt		e Director, Policy	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		350.02	P/R Deduction (\$15.91 Bi- Weekly)
- 3.	Full Name (Last, First, Middle Initial) Mr. James Wadzinski			Date of Receipt
	Mailing Address One North Franklin			12 31 / Y Y Y Y Y
	City	State	Zip Code	Transaction ID: PR1347703424682
	Chicago	<u> </u>	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice Pres	n sident Account Services	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$20.00 Bi- Weekly)
- C.	Full Name (Last, First, Middle Initial) Mr. Jack A. Mackay			Date of Receipt
•	Mailing Address One North Franklin			M M / D D / Y Y Y Y Y 1 1 2 3 1 2 0 1 0
	City	State	Zip Code	Transaction ID: PR1347703624682
	Chicago	IL	60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice Pres	n sident & CIO	
	Receipt For:	Aggregate	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	P/R Deduction (\$20.00 Bi- Weekly)
				111.82
-	SUBTOTAL of Receipts This Page (optional)			- 11102
	TOTAL This Period (last page this line number of	only)		

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 159 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
Į.	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any perso e name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
L	Full Name (Last, First, Middle Initial) Ms. Susan Gergely		Date of Receipt
	Mailing Address One North Franklin		12 31 2010
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1347791024682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Association-Chicago Receipt For: Primary General	Occupation Director of Operations, AONE Aggregate Year-to-Date	P/R Deduction (\$14.00 Bi-
	Other (specify) ▼	350.00	Weekly)
	Full Name (Last, First, Middle Initial) Mr. John Slotman		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2010
	City	State Zip Code	Transaction ID: PR1384065324682
	Washington FEC ID number of contributing federal political committee.	DC 20004-2802	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa-	Occupation	
	tion-Washingt Receipt For: Primary General	Associate Director, Federal Relations  Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi-
	Other (specify) ▼	500.00	Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Sharon Allen	1	Date of Receipt
	Mailing Address 155 North Wacker Dri	ve	12 31 2010
	City	State Zip Code	Transaction ID: PR1474886224682
	Chicago	IL 60606-1709	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	35.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation  Membership and Marketing Manager  Aggregate Year-to-Date	ASHHR
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$17.50 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional) .		103.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 160 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person to name and address of any political committee to a	n for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Mark Colucci		Date of Receipt
Mailing Address 1061 N Penny Ln		1 2 3 1 2 0 1 0
City	State Zip Code	Transaction ID: PR1475133724682
<u>Palatine</u>	IL 60067-1821	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation	
tion-Chicago ' Receipt For:	National Director Sponsorship and Un  Aggregate Year-to-Date ▼	lde 
Primary General		P/R Deduction (\$20.00 Bi-
Other (specify) ▼	500.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Stephanie H. Drake		Date of Receipt
Mailing Address One North Franklin		12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR1492459924682
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation	
tion-Chicago Receipt For:	Associate Executive Director - ASHHF	1/A 
Primary General	Aggregate Year-to-Date ▼	P/R Deduction (\$20.00 Bi-
Other (specify) ▼	500.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Monica D Day		Date of Receipt
Mailing Address 10224 Prince Place #	205	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR1516850624682
Largo	MD 20774-1210	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Political Affairs Coordinator	
Receipt For:	Aggregate Year-to-Date ▼	1
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
	<b>_</b>	108.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 161 / 208 (check only one)    X   11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Elisa Arespacochaga		Date of Receipt
	Mailing Address One North Franklin	State 7in Code	12 31 2010
	City Chicago	State Zip Code IL 60606-3436	Transaction ID: PR1555656224682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director, Constituency Sec	<del></del>
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi-Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Clinton S. Manning		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 / 31 / 2010
	City Washington	State Zip Code DC 20004-2802	Transaction ID: PR1555656524682
	FEC ID number of contributing federal political committee.	C 20004-2002	Amount of Each Receipt this Period  28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Asst. Director Advocacy & Member C	Commu
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Kathy Poole		Date of Receipt
	Mailing Address One North Franklin		12 31 2010
	City	State Zip Code	Transaction ID: PR1589439924682
	Chicago FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Governance Projects	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
ſ,	SUBTOTAL of Receipts This Page (optional)	<u> </u>	84.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 162 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using the	Statements may not be sold or used by any person are name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Mr. Robert Kehoe		Date of Receipt
Mailing Address One North Franklin		12 31 2010
City <u>Chicago</u>	State Zip Code IL 60606-3436	Transaction ID: PR1625368324682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.34
Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Publisher Vertical Magazine	es
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.07	P/R Deduction (\$16.67 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Kelly Redmond		Date of Receipt
Mailing Address 155 North Wacker Di	rive	12 31 Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR1625588824682
Chicago	IL 60606-1709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Director Operations	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General  Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Stephen Hines		Date of Receipt
Mailing Address 155 North Wacker Di	rive	1 2 3 1 2 0 1 0
City	State Zip Code	Transaction ID: PR1648726624682
Chicago	IL 60606-1709	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	33.34
Name of Employer American Hospital Associa- tion-Chicago	Occupation VP, Research HRET	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.07	P/R Deduction (\$16.67 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)	·	94.68

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 163 / 208 (check only one)    X   11a
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Lisa Grabert		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 31 2010
	City Washington	State Zip Code DC 20004-2801	Transaction ID: PR1671258624682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C 20004-2001	91.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director, Policy	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$45.45 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr Robert P. David		Date of Receipt
	Mailing Address One North Franklin		12 31 2010
	City	State Zip Code	Transaction ID: PR1677512424682
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	91.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$45.45 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Linda Fishman		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N	12 31 7 2010
	City	State Zip Code	Transaction ID: PR327629124682
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Vice President, Public Policy	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
ſ,	SUBTOTAL of Receipts This Page (optional)	<u> </u>	262.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 164 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Debbie F. Weiner		Date of Receipt
Mailing Address 11004 Petersborough I	Drive	12 31 2010
City	State Zip Code	Transaction ID: PR327745924682
Rockville	MD 20852-3249	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Grassroots Advocacy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Michael P. McCue	<u> </u>	Date of Receipt
Mailing Address 122 N. Greenwood Ave	enue	12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327771624682
Park Ridge	IL 60068-3227	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Associate Director	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Suzanne R. Sonik	<u> </u>	Date of Receipt
Mailing Address One North Franklin		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327777224682
Chicago	IL 60606-3436	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Director, Long-Term Care	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
CURTOTAL of Descirts This Desc (entional)	<b>_</b>	148.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 165 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
or for commercial purposes, other than using	nd Statements may not be sold or used by any person the name and address of any political committee to so	for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) American Hospital Association PAG		
Full Name (Last, First, Middle Initial) Ms. Debra J. Stock		Date of Receipt
Mailing Address 1022 S. Harvey Ave	enue	12 31 2010
City <u>Oak Park</u>	State Zip Code IL 60304-2132	Transaction ID: PR327777824682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Member Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Neil J. Jesuele		Date of Receipt
Mailing Address 1003 Kimberly Plac	ee	12 31 2010
City	State Zip Code	Transaction ID: PR327801724682
Great Falls	VA 22066-1546	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa-	Occupation Executive Vice President	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Pamela Austin Thompson, RN, MSN		Date of Receipt
Mailing Address 325 Seventh Street Suite 700	, NW	12 31 YYYY 12 31 2010
City	State Zip Code	Transaction ID: PR327812024682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Chief Executive Officer, AONE & Sr. Vi	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
SURTOTAL of Receipts This Page (options	J)	200.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sche for each category of Detailed Summary	of the
A 0	ny information copied from such Reports and r for commercial purposes, other than using th	Statements may not be sold or used be name and address of any political co	y any person for the purpose of soliciting contributions ommittee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Ms. Joan H. Lewis		Date of Receipt
	Mailing Address 6034 North 22nd Stre		12 31 7 2010
	City <u>Arlington</u>	State Zip Code VA 22205-3408	Transaction ID: PR327831724682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Regional Executive Aggregate Year-to-Date	
	Primary General Other (specify) ▼		P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. Robert J. Donovan		Date of Receipt
	Mailing Address One North Franklin S	reet	12 7 31 7 2010
	City	State Zip Code	Transaction ID: PR327846224682
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Meetings &	Travel Serv
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	50	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Ellen A. Pryga		Date of Receipt
	Mailing Address 2401 Calvert Street, N Apt. 1008	IW	1 2
	City	State Zip Code	Transaction ID: PR327851924682
	Washington	DC 20008-2614	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С	40.00
	Name of Employer American Hospital Associa- tion-Washingt Receipt For:	Occupation Director, Policy Development Aggregate Year-to-Date	nt
	Primary General Other (specify) ▼		P/R Deduction (\$20.00 Bi-Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional)		120.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 167 / 208 (check only one)    X   11a
A	ny information copied from such Reports and S for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Mark Seklecki		Date of Receipt
	Mailing Address 325 Seventh Street, N' Suite 700		12 31 2010
	City <u>Washington</u>	State         Zip Code           DC         20004-2818	Transaction ID: PR327858024682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Association-Washingt Receipt For: Primary General Other (specify)	Occupation Vice President, Political Affairs  Aggregate Year-to-Date  1000.00	P/R Deduction (\$40.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Mr. John F. Barry		Date of Receipt
	Mailing Address One North Franklin		12 31 2010
	City Millis	State Zip Code	Transaction ID: PR327877824682
	FEC ID number of contributing federal political committee.	MA 60606-3436	Amount of Each Receipt this Period  80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. George F. Bergstrom		Date of Receipt
	Mailing Address 130 North Garland Co #3002	urt	12 31 YYYY 12010
	City	State Zip Code	Transaction ID: PR327895724682
	Chicago	IL 60602-4750	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	90.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Vice President  Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$45.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		250.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s for each category of the Detailed Summary Page	(crieck only one)
or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	statements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Eileen M. Collins Offner		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	12 31 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR327906124682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa-	Occupation Director Policy Development	
tion-Washingt Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial)		Date of Descirt
Ms. Judy Williams  Mailing Address One North Franklin St	reet	Date of Receipt  1 2 3 1 2 0 1 0
City	State Zip Code	Transaction ID: PR327918924682
<u>Chicago</u>	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa-	Occupation Director Membership	
tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Richard J. Umbdenstock		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	M M / D D / Y Y Y Y Y 1 Y 1 1 2 3 1 2 0 1 0
City	State Zip Code	Transaction ID: PR328132824682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation President and Chief Executive O	fficer
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	P/R Deduction (\$40.00 Bi- Weekly)
SURTOTAL of Receipts This Page (ontional)		136.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 169 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Barbara Lorsbach		Date of Receipt
Mailing Address 204 7th Ave		12 31 4 2010
City <u>La Grange</u>	State Zip Code  IL 60525-6406	Transaction ID: PR328136924682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation Sr. Vice President, Member Relations Aggregate Year-to-Date ▼	P/R Deduction (\$40.00 Bi-
Other (specify)	1000.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Lauren A. Barnett		Date of Receipt
Mailing Address One North Franklin St		12 31 7 2010
City	State Zip Code	Transaction ID: PR328174924682
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, SHSMD	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Donna J. Melkonian		Date of Receipt
Mailing Address 5545 North Wayne		12 31 2010
City Chicago	State Zip Code  IL 60640-1318	Transaction ID: PR328223824682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	80.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Vice President Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		188.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 170 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16 11
0	ny information copied from such Reports and St r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any personame and address of any political committee to	son for the purpose of soliciting contributions to solicit contributions from such committee.
$\angle$	American Hospital Association PAC		
١.	Full Name (Last, First, Middle Initial) Mr. Ron O. Purcell		Date of Receipt
	Mailing Address 1093 N. Faldo Way		12 31 7 2010
	City <u>Eag</u> le	State Zip Code ID 83616-5369	Transaction ID: PR328241424682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 562.50	P/R Deduction (\$20.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Mr. Richard J. Pollack		Date of Receipt
	Mailing Address 3475 North Venice Stre	1 2 3 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
	City	State Zip Code	Transaction ID: PR328260924682
	Arlington  FEC ID number of contributing federal political committee.	VA 22207-4446	Amount of Each Receipt this Period  80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Executive Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Lori M. Schor		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	V	12 31 2010
	City Washington	State Zip Code DC 20004-2818	Transaction ID: PR328341824682
	FEC ID number of contributing federal political committee.	C 20004-2016	Amount of Each Receipt this Period  80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Political Action & Grassroom	ot
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1010.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		200.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>~</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 171 / 208   (check only one)
Any information copied from such Reports ar	nd Statements may	y not be sold or used by any perso	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)	for commercial purposes, other than using the name and address of any political committee to so		
American Hospital Association PA	C		
Full Name (Last, First, Middle Initial) Ms. Carla L. Luggiero			Date of Receipt
Mailing Address 325 Seventh Street Suite 700	-		12 31 2010
City <u>Washington</u>	State DC	Zip Code 20004-2818	Transaction ID: PR328490124682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		20.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior As	n ssociate Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	P/R Deduction (\$10.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Carolyn Forcina			Date of Receipt
Mailing Address 200 Clover Hill Court		12 / 31 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City Yardley	State PA	Zip Code 19067-5736	Transaction ID: PR328511824682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		80.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional	n Executive	7
Receipt For: Primary General	Aggregate	Year-to-Date ▼	P/R Deduction (\$40.00 Bi-
Other (specify)	0 0	1000.00	Weekly)
Full Name (Last, First, Middle Initial) Ms. Alicia N. Mitchell	•		Date of Receipt
Mailing Address 1501 N. Harrison S	treet		12 31 2010
City Arlington	State VA	Zip Code 22205-2726	Transaction ID: PR328512024682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		40.00
Name of Employer American Hospital Associa- tion-Washingt	<del></del>	ice President, Communicatio	ons
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional	) 		140.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 172 / 208 (check only one)    X
,	ny information copied from such Reports and S r for commercial purposes, other than using the	statements may not be sold or used by any per e name and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. George Arges		Date of Receipt
	Mailing Address One North Franklin St		12 31 7 2010
	City Chicago	State Zip Code IL 60606	Transaction ID: PR328641124682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Senior Director, Health Data Manaç Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Anthony J. Burke		Date of Receipt
	Mailing Address One North Franklin Av	e.	12 31 2010
	City	State Zip Code	Transaction ID: PR328913324682
	Chicago FEC ID number of contributing	IL 60606	Amount of Each Receipt this Period
	federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation President & CEO, AHA Solutions, I	nc. &
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Rebecca Chickey		Date of Receipt
	Mailing Address One North Franklin St	reet	12 31 2010
	City	State Zip Code	Transaction ID: PR329013424682
	Chicago	IL 60606	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation SPSA Director	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		160.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 173 / 208 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	Statements may not be sold or used by any per e name and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Dr. John R. Combes		Date of Receipt
	Mailing Address One North Franklin		12 31 2010
	City Chicago	State Zip Code  IL 60606-3436	Transaction ID: PR329071324682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation President & Chief Operating Officer  Aggregate Year-to-Date ▼	-, C
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi-Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Robyn Cooke		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2010
	City	State Zip Code	Transaction ID: PR329084424682
	Washington FEC ID number of contributing federal political committee.	DC 20004-2818	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Mr. W. Thomas Deweese		Date of Receipt
	Mailing Address 500 Interstate Bouleva	ard South	12 31 2010
	City	State Zip Code	Transaction ID: PR329215724682
	Nashville FEC ID number of contributing federal political committee.	TN 37210-4634	Amount of Each Receipt this Period 80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional) .	I	200.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 174 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16 1
A	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any pers	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. John Evans		Date of Receipt
	Mailing Address One North Franklin St	reet	12 31 YYYYY 12 31 2010
	City Chicago	State Zip Code IL 60606	Transaction ID: PR329342624682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For: Primary General	Occupation Senior Vice President & CFO Aggregate Year-to-Date ▼	P/R Deduction (\$14.00 Bi-
_	Other (specify)	350.00	Weekly)
	Full Name (Last, First, Middle Initial) Ms. Audrey L. Harris  Mailing Address 1136 W. Farwell Ave.		Date of Receipt
		Otata 7in Ocale	12 31 2010
	City Chicago	State Zip Code  IL 60626-3861	Transaction ID: PR329654224682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Executive Director, ASDVS	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Patricia Meersman		Date of Receipt
	Mailing Address One North Franklin		12 31 2010
	City	State Zip Code	Transaction ID: PR330343324682
	Chicago	IL 60606-3436	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Senior Director Member Relations  Aggregate Year-to-Date	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		96.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 175 / 208 (check only one)  X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and S r for commercial purposes, other than using the	atements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
<u></u>	Full Name (Last, First, Middle Initial) Mr. Thomas Misfeldt		Date of Receipt
	Mailing Address One North Franklin		12 31 7 2010
	Chicago	State Zip Code IL 60606-3436	Transaction ID: PR330411624682
	Chicago  FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period 40.00
	Name of Employer American Hospital Associa-	Occupation Associate Regional Executive	
	tion-Chicago Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Maureen D. Mudron		Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700		12 / 31 / 2010
	City	State Zip Code	Transaction ID: PR330465224682
	Washington	DC 20004-2818	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Deputy General Counsel	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Paul N. Muraca		Date of Receipt
	Mailing Address 4960 138th Circle Wes	-	12 31 2010
	City	State Zip Code	Transaction ID: PR330475424682
	Apple Valley	MN 55124-9229	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Regional Executive	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)		148.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 176 / 208 (check only one)    X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
	Full Name (Last, First, Middle Initial) Mr. Gene O'Dell		Date of Receipt
	Mailing Address One North Franklin		12 31 7 2010
	City Chicago	State Zip Code  IL 60606-3436	Transaction ID: PR330547724682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Vice President, Strategic Planning	
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Eileen O'Keefe		Date of Receipt
	Mailing Address 172 Atteridge		12 31 2010
	City	State Zip Code	Transaction ID: PR330549224682
	Lake Forest	IL 60045-1715	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, Constituency Section	
	Receipt For:	Aggregate Year-to-Date ▼	
	Primary General Other (specify) ▼	1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Anthony Spohn		Date of Receipt
	Mailing Address 3219 N. Oriole		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City	State Zip Code	Transaction ID: PR331098324682
	Chicago	IL 60634-3232	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	40.00
	Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director, Associate Membe	ersh
	Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	P/R Deduction (\$20.00 Bi- Weekly)
Γ	SUBTOTAL of Receipts This Page (optional)		160.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 177 / 208 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports and Sor for commercial purposes, other than using the	Statements may not be sold or used by any perse e name and address of any political committee t	son for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)		
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Debi H. Tucker, Esq.		Date of Receipt
Mailing Address 1101 N. Kentucky Stro	eet	12 31 2010
City	State Zip Code	Transaction ID: PR331278824682
Arlington	VA 22205-3515	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, State Issues Forum	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Darlene S. Vanderbush	1	Date of Receipt
Mailing Address 26 West Glendale Ave	).	12 31 2010
City	State Zip Code	Transaction ID: PR331304224682
Alexandria	VA 22301-2402	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	106.71
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Advocacy and Public Policy	/ Op
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1000.00	P/R Deduction (\$53.33 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Jo Ann Webb	1	Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	1 2 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR331379124682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Sr. Director Federal Relations & Pol	ic
Receipt For:  Primary General	Aggregate Year-to-Date ▼	-   D/D D
Other (specify)	350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		162.71

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 178 / 208 (check only one)    X   11a
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person ename and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Judy Weinsheimer		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700		12 31 2010
City <u>Washington</u>	State         Zip Code           DC         20004-2818	Transaction ID: PR331386924682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt Receipt For:  Primary General Other (specify) ▼	Occupation Senior Associate Director  Aggregate Year-to-Date ▼  350.00	P/R Deduction (\$14.00 Bi-Weekly)
Full Name (Last, First, Middle Initial) Mr. Alex R. White, Sr.		Date of Receipt
Mailing Address 6225 US Hwy 290 E		12 31 7 2010
City	State Zip Code	Transaction ID: PR331416024682
Austin	TX 78761-5587	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	120.00
Name of Employer American Hospital Associa- tion-Chicago	Occupation AHA Regional Executive for TX	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1500.00	P/R Deduction (\$60.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. Woodin Dale		Date of Receipt
Mailing Address 800 W. Central Road		12 31 YYYY 2010
City	State Zip Code	Transaction ID: PR331481324682
Arlington Heights	IL 60005-2349	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director, ASHE  Aggregate Year-to-Date	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		176.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 179 / 208 (check only one)    X   11a
0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC		
۷.	Full Name (Last, First, Middle Initial) Mr. Donald May		Date of Receipt
	Mailing Address 521 Great Falls St.		12 31 2010
	City Falls Church	State Zip Code VA 22046-2613	Transaction ID: PR331533224682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Policy	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Ms. Elizabeth Summy		Date of Receipt
	Mailing Address One North Franklin	12 31 2010	
	City	State Zip Code	Transaction ID: PR346168124682
	Chicago  FEC ID number of contributing federal political committee.	IL 60606-3436	Amount of Each Receipt this Period  80.00
	Name of Employer American Hospital Associa- tion-Chicago	Occupation Vice President, PMG	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
. –	Full Name (Last, First, Middle Initial) Ms. Kristin Welsh		Date of Receipt
	Mailing Address 325 Seventh Street, N Suite 700	W	12 31 2010
	City Washington	State Zip Code DC 20004-2801	Transaction ID: PR517619724682  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	80.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	P/R Deduction (\$40.00 Bi- Weekly)
Γ,	SUBTOTAL of Receipts This Page (optional) .		240.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	for	e separate schedule(s) each category of the stailed Summary Page	FOR LINE NUMBER: PAGE 180 / 208 (check only one)    X
0	ny information copied from such Reports and S r for commercial purposes, other than using the	tatements may not b name and address	e sold or used by any perso of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) Ms. Megan Cundari			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700			12 31 2010
	City Washington		Zip Code 20004-2818	Transaction ID: PR518031924682
	FEC ID number of contributing federal political committee.	C	20004-2010	Amount of Each Receipt this Period  60.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associa	ate Director	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-	to-Date ▼ 750.00	P/R Deduction (\$30.00 Bi- Weekly)
_	Full Name (Last, First, Middle Initial) Ms. Laura M. Werner			Date of Receipt
	Mailing Address 325 Seventh Street, NV Suite 700	N		12 31 2010
	City		Zip Code	Transaction ID: PR560101524682
	Washington  FEC ID number of contributing federal political committee.	DC 2	20004-2818	Amount of Each Receipt this Period 28.00
	Name of Employer American Hospital Associa- tion-Washingt	Occupation Project Manag	ger	
	Receipt For:	Aggregate Year-		
	Primary General Other (specify) ▼		350.00	P/R Deduction (\$14.00 Bi- Weekly)
	Full Name (Last, First, Middle Initial) Mr. Carlos Jackson			Date of Receipt
	Mailing Address 325 Seventh Street, NV	N		1 2 3 1 2 0 1 0
	City		Zip Code	Transaction ID: PR566280924682
	Washington	DC 2	20004-2802	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		40.00
	Name of Employer American Hospital Associa- tion-Washingt		ector, Federal Relations	3
	Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-	500.00	P/R Deduction (\$20.00 Bi- Weekly)
	SUBTOTAL of Receipts This Page (optional)	1		128.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 181 / 208 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any personame and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Ashley B. Thompson		Date of Receipt
Mailing Address 606 S. Royal St.		12 31 2010
City	State Zip Code	Transaction ID: PR766023724682
Alexandria	VA 22314-4142	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director, Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Rochelle M. Archuleta	<u> </u>	Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	12 31 2010
City	State Zip Code	Transaction ID: PR801366324682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Associate Director Policy	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Lisa Kidder Hrobsky		Date of Receipt
Mailing Address 325 Seventh Street, NV Suite 700	N	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR876637224682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	40.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Vice President, Legislative Affairs	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	500.00	P/R Deduction (\$20.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional)		108.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 182 / 208 (check only one)    X
Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	Statements may not be sold or used by any personal statements and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Ms. Jennifer Armstrong Gay		Date of Receipt
Mailing Address 10702 Benning Way		12 31 2010
City Spotsylvania	State Zip Code VA 22551-4670	Transaction ID: PR928186524682  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C 22331 4076	31.82
Name of Employer American Hospital Associa- tion-Washingt	Occupation Director Communication Strategies	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 350.02	P/R Deduction (\$15.91 Bi- Weekly)
Full Name (Last, First, Middle Initial) Ms. Sheila R. Meadows		Date of Receipt
Mailing Address 325 Seventh Street, N Suite 700	W	12 31 7 2010
City	State Zip Code	Transaction ID: PR936292324682
Washington	DC 20004-2818	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Washingt	Occupation Senior Director of Operations	
Receipt For:  Primary General  Other (specify) ♥	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
Full Name (Last, First, Middle Initial) Mr. David A. Strickland		Date of Receipt
Mailing Address One N. Franklin Stree	t	M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: PR939603924682
Chicago	IL 60606	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	28.00
Name of Employer American Hospital Associa- tion-Chicago Receipt For:	Occupation Executive Director Quality Center  Aggregate Year-to-Date	
Primary General Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	P/R Deduction (\$14.00 Bi- Weekly)
SUBTOTAL of Receipts This Page (optional) .	······	87.82
		162769.02

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 183 / 208 (check only one)  11a 11b 11c X 12 13 14 15 16
Any information copied from such Reports and St or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)	atements may not be sold or used by any pers name and address of any political committee t	son for the purpose of soliciting contributions o solicit contributions from such committee.
American Hospital Association PAC  Full Name (Last, First, Middle Initial)  Texas Hospital Association HOSPAC - Federal  Mailing Address P.O. Box 15587		Date of Receipt
City Austin	State Zip Code TX 78761-5587	Transaction ID: 18793430  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00301325	22012.00
Name of Employer  Receipt For:  Primary General Other (specify) ▼	Occupation  Aggregate Year-to-Date ▼  116812.00	
Full Name (Last, First, Middle Initial) Wisconsin Hospital Association Federal PAC Mailing Address 5510 Research Park Dr	rive	Date of Receipt  1 2 1 4 2 0 1 0
City	State Zip Code	Transaction ID: 18793616
Madison	WI 53725-9038	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00359455	600.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 10582.61	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal		Date of Receipt
Mailing Address 1215 K Street Suite 800		12 16 2010
City	State Zip Code	Transaction ID: 18795042
Sacramento  FEC ID number of contributing federal political committee.	CA 95814 C C00237495	Amount of Each Receipt this Period  10000.00
Name of Employer	Occupation	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 145000.00	
SUBTOTAL of Receipts This Page (optional)		32612.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 184 / 208 (check only one)  11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the	tatements may not be sold or used by any perso name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
NAME OF COMMITTEE (In Full)  American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Hospital and Healthsystem Assoc. of PA - Federa	al Political Action Comm (HAPAC)	Date of Receipt
Mailing Address Post Office Box 8600	State Zip Code	1 2
City <u>Harrisburg</u>	PA 17105-8600	Transaction ID: 18795579  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00128082	2500.00
Name of Employer	Occupation	
Receipt For:  Primary  General  Other (specify)	Aggregate Year-to-Date ▼ 82500.00	
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal		Date of Receipt
Mailing Address 1215 K Street Suite 800		12 22 2010
City	State Zip Code	Transaction ID: 18799422
Sacramento	CA 95814	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<b>C</b> C00237495	15000.00
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	_
Primary General Other (specify) ▼	160000.00	
Full Name (Last, First, Middle Initial) AZHHA Political Action Committee (Federal)		Date of Receipt
Mailing Address 2901 North Central Av Suite 900		12 20 2010
City	State Zip Code	Transaction ID: 18799434
Phoenix  FEC ID number of contributing federal political committee.	AZ 85012 C C00217687	Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	-
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 15000.00	
SUBTOTAL of Receipts This Page (optional)		22500.00
TOTAL This Period (last page this line number	only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 185 / 208 (check only one)  11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Hospital Association PAC	Statements may not be sold or used by any person e name and address of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City Sacramento FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code CA 95814  C C00237495  Occupation  Aggregate Year-to-Date  165000.00	Date of Receipt  M M M / D D / Y Y Y Y Y  1 2 3 2 3 1 2 0 1 0  Transaction ID: 18800258  Amount of Each Receipt this Period  5000.00
Full Name (Last, First, Middle Initial) Texas Hospital Association HOSPAC - Federal Mailing Address P.O. Box 15587  City Austin FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code TX 78761-5587  C C00301325  Occupation  Aggregate Year-to-Date ▼  119740.00	Date of Receipt  12 28 2010  Transaction ID: 18800376  Amount of Each Receipt this Period  2928.00
Full Name (Last, First, Middle Initial) California Healthcare Association PAC - Federal Mailing Address 1215 K Street Suite 800 City Sacramento FEC ID number of contributing federal political committee.  Name of Employer  Receipt For: Primary General Other (specify)	State Zip Code CA 95814  C C00237495  Occupation  Aggregate Year-to-Date  186000.00	Date of Receipt    M
SUBTOTAL of Receipts This Page (optional)		28928.00
TOTAL This Period (last page this line number	only)	84040.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 186 / 208 (check only one)  11a 11b X 11c 12 13 14 15 16 17
	Any information copied from such Reports and Sta or for commercial purposes, other than using the r  NAME OF COMMITTEE (In Full)	atements ma name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
	American Hospital Association PAC  Full Name (Last, First, Middle Initial)			
A.	HCA Good Government Fund-Federal PAC  Mailing Address On Park Plaza PO Box 550			Date of Receipt  1 2 2 0 1 0
	City Nashville	State TN	Zip Code 37202-0550	Transaction ID: 18799427
	FEC ID number of contributing federal political committee.		3/202-0550	Amount of Each Receipt this Period 5000.00
	Name of Employer	Occupatio	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
В.	Full Name (Last, First, Middle Initial) TENET Healthcare Corporation Federal PAC (Rec	eipts)		Date of Receipt
	Mailing Address 1445 Ross Avenue Suite 1400			12 30 YYYYY 12 30 2010
	City	State	Zip Code	Transaction ID: 18816317
	<u>Dallas</u>	TX	75202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	<b>C</b> C00	0119354	5000.00
	Name of Employer	Occupatio	n	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	10000.00
TOTAL This Period (last page this line number only)	<b>•</b>	10000.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate s for each catego Detailed Summ	ory of the	FOR LINE NUMBER: PAGE 187 / 208 (check only one)  11a 11b 11c 12 13 14 15 16 17 17
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements may name and add	y not be sold or use dress of any politic	ed by any person al committee to s	for the purpose of soliciting contributions olicit contributions from such committee.
	NAME OF COMMITTEE (In Full) American Hospital Association PAC				
Α.	Full Name (Last, First, Middle Initial) Citibank, F.S.B.				Date of Receipt
	Mailing Address 1400 G Street, NW				11 30 2010
	City	State	Zip Code		Transaction ID: 18868133
	Washington	DC	20005		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			89.31
	Name of Employer	Occupatio	n		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼	2175.01	Interest
В.	Full Name (Last, First, Middle Initial) Citibank, F.S.B.				Date of Receipt
	Mailing Address 1400 G Street, NW				1 2 3 1 2 0 1 0
	City	State	Zip Code		Transaction ID: 18868134
	Washington	DC	20005		Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C			87.83
	Name of Employer	Occupatio	n		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼	2262.84	Interest

SUBTOTAL of Receipts This Page (optional)	<b>•</b>	177.14
TOTAL This Period (last page this line number only)	<b>•</b>	177.14

	SHEDULE B (FEC FORM 3X EMIZED DISBURSEMENTS	Use separate scriedule(s)			(crieck only one)				
		Detailed Summary Pa	age		21b 27	22 X 23 24 25 2 28a 28b 28c 29 3			
	y Information copied from such Reports and for commercial purposes, other than using t								
	NAME OF COMMITTEE (In Full)								
>	American Hospital Association PAC	;							
	Full Name (Last, First, Middle Initial)					Transaction ID: 18790979			
	Maloney For Congress					Date of Disbursement  1 2 0 9 2 0 1 0			
	Mailing Address 49 East 92nd Stre					12 09 2010			
	City New York	State Zip Code NY 10128				Amount of Each Disbursement this Period			
	Purpose of Disbursement Void of 7/2010 Contribution			01	1	-2000.00			
	Candidate Name Rep. Carolyn B. Maloney			ateg Typ	ory/				
	Office Sought: X House	Disbursement For: 2010		. , ,		Void of 7/2010 Contributi-			
	Senate President	X Primary Gene Other (specify) ▼	eral			on			
_	State: NY District: 14  Full Name (Last, First, Middle Initial)								
	Ryan For Congress					Transaction ID: 18790984  Date of Disbursement			
	Mailing Address P. O. Box 1919					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City Janesville	State Zip Code WI 53547				Amount of Each Disbursement this Period			
	Purpose of Disbursement Void of 5/2010 Contribution		Тг	01	1	-1000.00			
	Candidate Name Rep. Paul D. Ryan			ateg	ory/				
	Senate President	Disbursement For: 2010  X Primary Gene Other (specify) ▼	eral			Void of 5/2010 Contribution			
	State: WI District: 01  Full Name (Last, First, Middle Initial)					T ID 4070005			
	Braley For Congress					Transaction ID: 18790985 Date of Disbursement			
	Mailing Address PO Box 390					$\begin{array}{c ccccccccccccccccccccccccccccccccccc$			
	City Waterloo	State Zip Code IA 50704				Amount of Each Disbursement this Period			
	Purpose of Disbursement Void of 5/6/2010 Contribution	00704	Тг	01	1	-1500.00			
	Candidate Name Rep. Bruce Braley				ory/ e				
	Office Sought: X House Senate President	Disbursement For: 2010  X Primary Gene Other (specify)	eral	715		Void of 5/6/2010 Contribution			
_	State: IA District: 01								
C١	UBTOTAL of Disbursements This Page (o	otional)			•	-4500.00			

Any Info		SBURSEMEN <sup>*</sup>	l S for e	each categor ailed Summa			neck on 21b	22	X 23	24	☐ 25	
or for c	ormation copie						27	28a	28b	28c	29	
		ed from such Reports a poses, other than usin										
\	ME OF COM	MITTEE (In Full)  Dital Association PA			<u> </u>							-
	•	First, Middle Initial) J.S. House Commi	ttee						action ID: of Disburse	ement	993	
Mai	iling Address	215 Fourth Aver	nue					1 <sup>M</sup> 2	M / DO	9 / Y	ž 0 <sup>2</sup>	í o <sup>°</sup>
City Ha	y Iddon Height	'S	State NJ	Zip C 0707				Amou	nt of Each			
	rpose of Disbuid of 3/2009 Co					01	1	L.			-1000.	00
	ndidate Name p. Robert E.	Andrews				Categ	ory/					
	ice Sought:	X House Senate President	Disbursement F  X Prima Other		2010 General			Void on	of 3/2009	Contrib	uti-	
Full	•	District: 01 First, Middle Initial) Congress Campa	ign Committee						action ID:		417	
Mai	iling Address	PO Box 1631						1 <sup>M</sup> 2	M / D 1	D / Y	ž 0 -	í o <sup>°</sup>
City Bal	y Itimore		State MD	Zip C 2120				Amou	nt of Each	Disburse	ment thi	s Peri
Pur	rpose of Disbu		2			01	1				-1000.	00
	ndidate Name p. Elijah E.	Cummings				Categ	ory/					
	ice Sought:	X House Senate President District: 07	Disbursement F  X Prima  Other		2010 General			Void on	of 2/2010	Contrib	uti-	
Full	l Name (Last,	First, Middle Initial) For Congress							action ID: of Disburse		420	
Mai	iling Address	2336 S. East O	cean Blvd. #31	3				1 2	M / D 1	D / Y	ž 0 <sup>2</sup>	ĺ 0 <sup>Y</sup>
City Stu	y uart		State FL	Zip C 3499				Amou	nt of Each			-
	rpose of Disbuid of 11/2009 (					01	1	<u>L.</u>			-2500.	00
	ndidate Name p. Thomas	J. Rooney				Categ Typ	-					
Offi	ice Sought:	X House Senate President	Disbursement F X Prima Other		2010 General			Void of ion	of 11/200	9 Contri	out-	
Sta	ite: FL	District: 16		- · ·								

SCHEDULE B (FEC FOIIII 3X)	Use separate schedule(s)				NE NUMBER: [ only one)				PAGE 190 / 208		
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28a	X	23 28b	24 28		25 29	2 3
Any Information copied from such Reports and State or for commercial purposes, other than using the nar NAME OF COMMITTEE (In Full)  American Hospital Association PAC											
/											
Full Name (Last, First, Middle Initial) Friends of Joe Baca  Mailing Address 555 Capitol Mall Suite	425				Date o		sburse	1879 ement 9		9 2 0 1 0	Y
City	State Zip Code				Amou	nt of				nt this F	
Sacramento	CA 95814				Alliou	TIL OI	Eacii	DISDUI			
Purpose of Disbursement Void of 10/2009 Contribution Candidate Name		_	011 atego						-2	200.00	•
Rep. Joseph Baca			Тур	-							
	sement For: 2010  K Primary General  Other (specify)				Void o	of 10	0/200	9 Con	tribut	:-	
Full Name (Last, First, Middle Initial)					Trans	actio	on ID:	187	9150	2	
Moore For Congress					Date o		sburse	ement			Υ
Mailing Address PO Box 16646					1 2		0	9		ž o ž o	
City Milwaukee	State Zip Code WI 53216				Amou	nt of	Each	Disbur	seme	nt this F	eriod
Purpose of Disbursement Void of 6/2009 Contribution			011		L.				-10	00.00	
Candidate Name Rep. Gwendolynne Moore			Category/ Type	-							
9 1	sement For: 2010  C Primary General  Other (specify)				Void o	of 6/	2009	Contr	ributi-		
Full Name (Last, First, Middle Initial) Adam Smith For Congress Committee					Trans Date o			1879 ement	9150	3	
Mailing Address PO Box 23626					1 <sup>M</sup> 2	M /	<sup>D</sup> 0	9 /	Y	ž o i o	Y
City Federal Way	State Zip Code WA 98093				Amou	nt of	Each	Disbur		nt this F	-
Purpose of Disbursement Void of 6/2009 Contribution			011				•		-2	500.00	_
Candidate Name Rep. D. Adam Smith											
Senate President	sement For: 2010  K Primary General  Other (specify)				Void o	of 6/	/2009	Contr	ributi-		
State: WA District: 09					_	_					
SUBTOTAL of Disbursements This Page (optional	)				<u> </u>	<u></u>			-37	00.00	-
TOTAL This Period (last page this line number onle FE6AN026	/)			•	<u> </u>					X) (Re	

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	)		DR LINE heck only	NUMBE	H:		L	PAGE	191	/ 208
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		È	21b 27	22 28a		23 28b		3c	25 29	
	y Information copied from such Reports and Sta for commercial purposes, other than using the n											S
	NAME OF COMMITTEE (In Full) American Hospital Association PAC											
<u>v                                    </u>	Full Name (Last, First, Middle Initial) Nadler For Congress					Trans	of Dis	burse	ement		_	V
	Mailing Address Village Station, PO Bo	ox 40				<sup>M</sup> 2	M /	0	9 /	¥ ;	ž 0 i (	) <sup>*</sup>
	City New York	State Zip Code NY 10014				Amou	nt of	Each	Disbu	rseme	nt this	Period
	Purpose of Disbursement Void of 6/2010 Contribution		Г	01	1					-20	00.00	)
	Candidate Name Rep. Jerrold L. Nadler				gory/							
	Office Sought:  X House Senate President State: NY District: 08	x Primary General Other (specify)	I			Void on	of 6/2	2010	Cont	ributi-		
	Full Name (Last, First, Middle Initial) Schiff For Congress					Trans	of Dis	burse	ement			
	Mailing Address 777 S. Figueroa St. Suite 4050					<sup>M</sup> 2	M /	0	9 /	Y	ž o ž (	) <sup>Y</sup>
	City Los Angeles	State Zip Code CA 90017				Amou	nt of	Each	Disbu	rseme	nt this	Perio
	Purpose of Disbursement Void of 6/2009 Contribution			01	1	<u> </u>	_			-20	00.00	)
	Candidate Name Rep. Adam B. Schiff			atec Typ	gory/ be							
	Office Sought:    X   House   Disbute     Senate   President     State: CA   District: 29	x Primary				Void on	of 6/2	2009	Cont	ributi-		
	Full Name (Last, First, Middle Initial) Lucille Roybal-Allard For Congress					Trans Date	of Dis	burse	ement			
	Mailing Address 6 E Street, Se					<sup>M</sup> 2	M /	<sup>D</sup> 0	9 /	¥ . :	ž 0 i (	) Y
	City Washington	State Zip Code DC 20003				Amou	nt of	Each	Disbu	rseme	nt this	Perio
	Purpose of Disbursement Void of 6/2009 Contribution			01	1.					-1(	00.00	)
	Candidate Name Rep. Lucille Roybal-Allard			atec Typ	gory/ be							
	Office Sought:  X House Senate President  State: CA District: 34	x Primary General Other (specify)	•			Void on	of 6/2	2009	Cont	ributi-		
										-50		

S	CHEDULE B (FEC Form 3X)	Use separate schedule(s	5)			NUMBE	R:				PAC	ЭE	192	/ 208
_	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	,	È	heck onl 21b 27	22 28a	X	23 28	_	24 28	С		25 29	<u>2</u> 3
	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam													3
	NAME OF COMMITTEE (In Full)  American Hospital Association PAC	o and address of any points	ai 00i		100 10 00	more corner		-						
L	Full Name (Last, First, Middle Initial)													
	Earl Pomeroy For Congress					Trans Date				1879 ment	916	93		
	Mailing Address Post Office Box 9336					<sup>M</sup> 2	М	′	0	9 /	Υ	ž	0 ť (	) <sup>Y</sup>
	City Fargo	State Zip Code ND 58106				Amou	int o	f Ea	ch [	Disbur	sen	nent	this I	Period
	Purpose of Disbursement Void of 6/2009 Contribution		Г	01	1	L.			0		_	100	00.00	)
	Candidate Name Rep. Earl Pomeroy		c	_	jory/									
	Senate X President	ement For: 2010 Primary General Other (specify)	•			Void on	of 6	/20	09	Contr	ibu	ti-		
_	State: ND District: 01													
	Full Name (Last, First, Middle Initial) Brady For Congress					<b>Trans</b> Date	of D	isbu	ırseı	ment	916			
	Mailing Address P.O. Box 8277					1 <sup>M</sup> 2	М		0	9 /	Y	ž	0 1 C	) Y
	City The Woodlands	State Zip Code TX 77387				Amou	int o	f Ea	ch [	Disbur	sen	nent	this I	Period
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	Candidate Name Rep. Kevin Patrick Brady		7	atec Typ	gory/ e									
	9 1	ement For: 2010 Primary General Other (specify)	•			Void on	of 3	/20	09	Contr	ibu	ti-		
	Full Name (Last, First, Middle Initial) Klein For Congress					Trans		_			917	'60		
	Mailing Address 21301 Powerline Road, S	Suite 204				<sup>M</sup> 2	М		0	9 /	Υ	ž	0 Ť (	) <sup>Y</sup>
	City Boca Raton	State Zip Code FL 33433				Amou	int o	f Ea	ch [	Disbur	sen	nent	this f	Period
	Purpose of Disbursement Void of 3/2009 Contribution		Т	01	1			-			-	100	00.00	)
	Candidate Name Rep. Ronald Klein		7 6	_	gory/									
	Office Sought:  X House Senate President  Disburse	ement For: 2010 Primary General Other (specify)	1	71-		Void on	of 3	/20	09	Contr	ibu	ti-		
_	State: FL District: 22													
1	SUBTOTAL of Disbursements This Page (optional)											200	0.00	,

	CHEDULE B (FEC Form 3X)	Use separate schedule(s	;)		OR LINE	_	3EF	₹:			Р	AGE	193	/ 20	8
IT	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page			21b 27	22 28		X	23 28b		24 280	<u> </u>	25 29		] 2 3
	ny Information copied from such Reports and Stater for commercial purposes, other than using the nam														
\(\frac{1}{2}\)	NAME OF COMMITTEE (In Full)	e and address of any pointe	ai 00i		100 10 3	Onon oc	11111	Juli	JII3 II	OIII	Sucii	COIIII	TIILLOC		
$ \rangle$	American Hospital Association PAC														
	Full Name (Last, First, Middle Initial) Perriello For Congress								on ID:		1879 ent	1761	l		
	Mailing Address PO Box 306					1	2 <sup>M</sup>	/	DC	9	] ′ [	Ý	01	0 <sup>Y</sup>	
	City Ivy	State Zip Code VA 22945				Am	oun	t of	Each	n Di	sburs	emer	nt this	Peri	iod
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	Candidate Name Rep. Thomas Stuart Price Perriello		C	atec Typ	ory/ e										
	Senate X President	ement For: 2010 Primary General Other (specify)				Voi on	d of	f 2/	2009	9 C	ontri	buti-			
_	State: VA District: 05														
	Full Name (Last, First, Middle Initial) BADGERPAC					Da	te of	f Di	sburs	em					
	Mailing Address 38 Ivy Street, S.E.					1	2 <sup>M</sup>	<u>'</u>	D C	9	]	Ý	01	0 <sup>Y</sup>	
	City Washington	State Zip Code DC				Am	oun	t of	Each	ı Di	sburs		nt this		iod
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	Candidate Name BADGERPAC		C	ateg Typ	ory/ e										
	Senate President	ement For: Primary General Other (specify)				Voi	d of	f 2/	2009	9 C	ontri	buti-			
	State: District:  Full Name (Last, First, Middle Initial)										1879	1764	1		
	Anna Eshoo For Congress  Mailing Address 555 Capitol Mall, Suite 1	425					te of		sburs D	em ) 9		Y 2	0 1 (	0 <sup>Y</sup>	
	City	State Zip Code				Am	oun	it of	Each	ı Di	sburs	emer	nt this	Peri	iod
	Sacramento  Purpose of Disbursement  Void of 2/2009 Contribution	CA 95814	Г	0.1	1							-15	00.00	0	-
	Candidate Name Rep. Anna G. Eshoo		L	01 ateg Typ	ory/										
	Senate X President	ement For: 2010 Primary General Other (specify)	1	,,,		Voi on	d of	f 2/	2009	) C	ontri	buti-			
Г	State: CA District: 14						_	_		_					_
١	SUBTOTAL of Disbursements This Page (optional)				•							-35	00.00	Ò	

В.

C.

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE		194 / 208
ITEMIZED DISBURSEMENTS	for each category of the	(check only		25 🗍 26
	Detailed Summary Page	27	_	29 30b
Any Information copied from such Reports and Stater or for commercial purposes, other than using the name				
NAME OF COMMITTEE (In Full)	,,			
American Hospital Association PAC				
Full Name (Last, First, Middle Initial) Evan Bayh Committee			Transaction ID: 18791766 Date of Disbursement	
Mailing Address 850 Fort Wayne Avenue			12 0 9 7 2 0	010
City Indianapolis	State Zip Code IN 46204		Amount of Each Disbursement	this Period
Purpose of Disbursement Void of 1/2009 Contribution		011	-100	0.00
Candidate Name Sen. Evan Bayh		Category/ Type		
Office Sought:    House   Disburs     X Senate     President     State: IN District:	ement For: 2010 Primary X General Other (specify)	,,	Void of 1/2009 Contribution	
Full Name (Last, First, Middle Initial)			Transaction ID: 18791835	
Kansans For Huelskamp			Date of Disbursement	
Mailing Address PO Box 410			12 09 7 20	) 1 0 <sup>Y</sup>
City Fowler	State Zip Code KS 67844		Amount of Each Disbursement	
Purpose of Disbursement Void of 11/2010 Contribution		011	-200	0.00
Candidate Name Mr. Timothy Huelskamp		Category/ Type		
Senate President X	ement For: 2010 Primary General Other (specify)		Void of 11/2010 Contribution	
	General Debt Re			
Full Name (Last, First, Middle Initial) Vern Buchanan For Congress			Transaction ID: 18793608 Date of Disbursement	
Mailing Address P. O. Box 48928			12  O 9  Y Y	010
City Sarasota	State Zip Code FL 34230		Amount of Each Disbursement	this Period
Purpose of Disbursement Void of 9/2010 Contribution		011	-100	0.00
Candidate Name Rep. Vern Buchanan		Category/ Type		
Senate President	ement For: 2010 Primary X General Other (specify)		Void of 9/2010 Contribution	
State: FL District: 13				
SUBTOTAL of Disbursements This Page (optional)		<b>&gt;</b>	-400	0.00

TOTAL This Period (last page this line number only) .....

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		De	etailed Summary Pa	ige		28b 28c 2	25 29
	nation copied from such Remercial purposes, other that						
NAME	OF COMMITTEE (In Full can Hospital Associat	)	71-				
	ame (Last, First, Middle Ini ns To Elect Phil Roe T	,			Date of Dis	on ID: 18793609 sbursement	
Mailing	Address PO Box 32	218			12	09 / 420	10
City Johns	on City	State TN	Zip Code 37602		Amount of	Each Disbursement th	
	se of Disbursement 10/2010 Contribution			011		-1000	).00
	late Name David Roe			Catego Type	ry/		
	Sought: X House Senate President		For: 2010 nary X General General Control (Specify)	eral	Void of 10	0/2010 Contribut-	
State:	TN District: 01 ame (Last, First, Middle Ini	tial)			Tuessassi	ID: 10010007	
	Kerry for Senate	,			Date of Dis	on ID: 18819207 sbursement	V · · ·
Mailing	Address 10 G Stree Suite 710	et NE			111	30 Y 20	10
City Wash	ington	State DC	Zip Code 20002		Amount of	Each Disbursement th	his Perio
Purpos	se of Disbursement			011	<u> </u>	3000	0.00
	late Name John F. Kerry			Catego	ry/		
Office State:	Sought: House  X Senate  President  MA District:	Disbursement X Prin Oth			2014 Con	tribution	
Full Na	ame (Last, First, Middle Ini nnell Senate Committe					on ID: 18819217 sbursement	
Mailing	Address PO Box 14	496			111	3 0 Y 2 0	10
City Louis	ville	State KY	Zip Code 40201		Amount of	Each Disbursement th	
	se of Disbursement Contribution			011		1000	0.00
	late Name Mitch McConnell			Catego Type	ry/		
	Sought: House  X Senate  President	Disbursement X Prin Oth		eral	2014 Con	tribution	
State:	KY District:						
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		OR LIN			₹:			РА	GE	196	/ 208
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27		22 [ 28a [	X	23 28b		24 28c	П	25 29	26 30b
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NAME OF COMMITTEE (In Full)	, p											
American Hospital Association PAC												
Full Name (Last, First, Middle Initial) Vern Buchanan For Congress				- 1	ransa Date o				18819 ent	218		
Mailing Address P. O. Box 48928					м . N	И /	D 3	3 0	/ Y	ž	0 Ť (	o <sup>Y</sup>
City Sarasota	State Zip Code FL 34230			1	Amour	nt of	Each	n Dis	sburse	men	t this	Period
Purpose of Disbursement Contribution		01	1			-				10	00.00	)
Candidate Name Rep. Vern Buchanan	,	Categ	jory/									
Senate President	sement For: 2012  Orimary General  Other (specify)			С	Contril	buti	ion					
State: FL District: 13  Full Name (Last, First, Middle Initial)												
Chris Gibson For Congress					Date o	f Di	sburs	eme	18819 ent			
Mailing Address PO Box 247					1 1	<b>1</b> /	□ 3	3 0	/ L	ž	0 1 (	o <sup>Y</sup>
City Kinderhook	State Zip Code NY 12106			1	Amour	nt of	Each	n Dis	sburse			
Purpose of Disbursement Contribution		01	1			-				25	00.00	)
Candidate Name Mr. Chris Gibson		Categ Typ	-									
Senate President	sement For: 2010 Primary General Other (specify)			С	Contril	buti	ion					
	General Debt Re											
Full Name (Last, First, Middle Initial) Freedom Fund					Date o	f Di	sburs	eme	-			
Mailing Address 128 N. Columbus Stree	t				<sup>M</sup> 2	И /	_ C	0 1	/	ž	0 1 (	o <sup>Y</sup>
City Alexandria	State Zip Code VA 22314			1	Amour	nt of	Each	n Dis	sburse	men	t this	Period
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Candidate Name Freedom Fund		Categ	jory/									
Senate President	sement For: Primary General Other (specify) ▼			2	010 (	Con	ıtribu	itior	1			
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NAME OF COMMITTEE (In Full)  American Hospital Association PAC	and data oct or any pointer		
Full Name (Last, First, Middle Initial)			Transaction ID: 18819226
Friends Of John Barrasso			Date of Disbursement  1 2 0 1 7 2 0 1 0
Mailing Address PO Box 52008			12 01 2010
City Casper	State Zip Code WY 82605		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		044	1000.00
Candidate Name Sen. John A. Barrasso, MD		011 Category/ Type	
X Senate President	x Primary General Other (specify)		Contribution
State: WY District: Full Name (Last, First, Middle Initial)			Transaction ID: 18819228
Cicilline Committee			Date of Disbursement
Mailing Address 102 Waterman St, Sui	te 2		M2 M / D0 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Providence	State Zip Code RI 02906		Amount of Each Disbursement this Period
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Candidate Name Rep. David Cicilline		Category/ Type	
Office Sought: X House Disbu	rsement For: 2010 Primary General X Other (specify)	1 71-	Contribution
	General Debt Re		
Full Name (Last, First, Middle Initial) Richmond For Congress			Transaction ID: 18819234 Date of Disbursement
Mailing Address 1631 Elysian Fields St	uite 150		12 DO 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City New Orleans	State Zip Code LA 70126		Amount of Each Disbursement this Period
Purpose of Disbursement Contribution		011	4000.00
Candidate Name Mr. Cedric Richmond		Category/	
Office Sought: X House Disbu Senate President	rsement For: 2010 Primary General X Other (specify)	Туре	Contribution
State: LA District: 02 2010	General Debt Re		
	al)		10000.00

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	Full Name (Last, Terri Sewell Fo	First, Middle Initial) or Congress									ID: 1 urseme		35	
	Mailing Address	P.O. Box 1964							1 <sup>M</sup> 2	M /	0 1	/ Y	ž 0 1	0 Y
	City Birmingham		Stat AL	e	Zip Code 35201				Amou	nt of E	ach Dis		ent this	
	Purpose of Disbu Contribution	ırsement					)11		L.				2500.00	)
	Candidate Name Ms. Terri Sewe		1 5				egory/ ype							
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_	State: AL Full Name (Last,	District: 07 First, Middle Initial)	2010 Gene	ral Deb	ot Re				Trans	action	ID: 1	88192	36	
	Chris Gibson I	or Congress							Date	of Disb	urseme			Y
	Mailing Address	PO Box 247							<sup>M</sup> 2		D 0 B	L	žoň	0
	City Kinderhook		Stat NY		Zip Code 12106				Amou	nt of E	ach Dis		ent this	
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	Mr. Chris Gibs						egory/ ype							
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			lark Dr						1 <sup>M</sup> 2	M /	<sup>D</sup> 0 8	/ Y	ž 0 1	0 Y
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	Mailing Address  City Anchorage	16158 Essex P	Stat		Zip Code 99516				Amou	nt of E	ach Dis		ent this	
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# SCHEDULE B (FEC Form 3X)

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	y Information copied from such Reports and Si for commercial purposes, other than using the				
Λ	NAME OF COMMITTEE (In Full)				
V	American Hospital Association PAC				
	Full Name (Last, First, Middle Initial) Nelson 2012				Transaction ID: 18819240
					Date of Disbursement  1 2 0 8 2 0 1 0
	Mailing Address PO Box 8666				12 08 2010
	City Omaha	State Zip Code NE 68108			Amount of Each Disbursement this Period
	Purpose of Disbursement				1000.00
	Contribution Candidate Name		_	011 ategory/	
	Sen. Ben Nelson			Туре	
	Office Sought:    House   Dist     X   Senate     President	oursement For: 2012  X Primary Genera  Other (specify) ▼			Contribution
	State: NE District:				
	Full Name (Last, First, Middle Initial) Ron Johnson For Senate Inc				Transaction ID: 18819270 Date of Disbursement
	Mailing Address 601 Oregon Street S	uite A			12 08 7 2010
	City Oshkosh	State Zip Code WI 54902			Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	1000.00
	Candidate Name Hon. Ronald Harold Johnson			ategory/ Type	
	Office Sought:  House X Senate President	oursement For: 2010 Primary Genera X Other (specify) ▼			Contribution
		0 General Debt Re			
	Full Name (Last, First, Middle Initial) Kansans For Huelskamp				<b>Transaction ID:</b> 18819271 Date of Disbursement
	Mailing Address PO Box 410				12 08 7 2010
	City Fowler	State Zip Code KS 67844			Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution			011	2000.00
			Ca	ategory/	
	Candidate Name Mr. Timothy Huelskamp			l vpe	
	Mr. Timothy Huelskamp  Office Sought: X House Senate Disk	oursement For: 2010 Primary Genera		Type	Contribution
	Mr. Timothy Huelskamp  Office Sought:  X House Senate President  Disk			Туре	Contribution

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CHEDULE B (FEC Form 3X)	Use separate schedule(s)				JMBER	:		PA	GE 200	/ 208	3
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	Detailed Summary Page	╢	27	Н	28a	X 23 28b	Н	24 28c	$H_{29}^{23}$	$\vdash$	] <sup>20</sup>   30b
y Information copied from such Reports and Stater	nents may not be sold or used	by any	persor	for t	he purp	ose of s	solici	ing co	ntributior	ns	
for commercial purposes, other than using the nam	e and address of any political	commi	ttee to	solicit	contrib	utions f	rom s	such c	ommittee	)	
NAME OF COMMITTEE (In Full)											
American Hospital Association PAC											
Full Name (Last, First, Middle Initial) Marco Rubio For Us Senate					<b>Transa</b> Date of				144		
Mailing Address 2030 South Douglas Ro	ad Suite 105				1 2 M		0 8	/ Y	ž 0 1	0 Y	
City	State Zip Code				Amount	of Eac	h Dis	burser	nent this	Perio	od
Coral Gables	FL 33134								1000.0	n	$\Box$
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Candidate Name Mr. Marco Rubio		Cate Ty									
X Senate President X	ement For: 2010 Primary General Other (specify)  eneral Debt Re			(	Contrib	ution					
Full Name (Last, First, Middle Initial)					Transa	ction ID	): 1	88194	491		
Long Leaf Pine PAC					Date of	_	seme	nt			
Mailing Address 607 14TH Street, NW Suite 800					12 M		14	/ Y	ž 0 1	0 Y	
City	State Zip Code				Amount	of Eac	h Dis	burser	nent this	Perio	od
Washington Purpose of Disbursement	DC 20005								2000.0	0	$\Box$
2010 Contribution		01	1		-	-	0				
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Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify)			2	2010 C	ontribu	ution				
Full Name (Last, First, Middle Initial)					Transa	ction IF	)- 1	8819	577		
Wu For Congress					Date of	Disburs	seme			· V	
Mailing Address 818 Sw Third Ave., #118	2				12	I. L	1 4	Ĺ	ž o ť	0	
City	State Zip Code				Amount	of Eac	h Dis	burser	nent this	Perio	od
Portland Purpose of Disbursement	OR 97204				, T				1000.0	0	$\Box$
Contribution		01	1				•			-	
Candidate Name Rep. David Wu		Cate	gory/								
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# SCHEDULE B (FEC Form 3X)

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NAME OF COMMITTEE (In F	,									
/ American Hospital Associ	ation PAC									
Full Name (Last, First, Middle   Scott Rigell For Congress	nitial)					action ID:		9624		
						f Disburse	D / 4	ΥΫ́	) 1 0	Y
Mailing Address 915 Firs Suite 10	t Colonial Road 0									
City Virginia Beach	State VA	Zip Code 23454			Amour	nt of Each	Disburse	ement t	this Pe	erio
Purpose of Disbursement				'				100	0.00	_
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Hon. Edward Scott Rigell	1 5			ype						
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State: VA District: 02										
Full Name (Last, First, Middle	,					action ID:		9626		
Robert Hurt For Congress					M	f Disburse	D /	YYY	) 1 0	Y
Mailing Address PO Box	2				12		4	2 (	) 1 0	_
City Chatham	State VA	Zip Code 24531			Amour	nt of Each	Disburse	ement t	this Pe	erio
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Candidate Name Mr. Robert Hurt				egory/ ype						
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Preside		er (specify)								
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Bass Victory Committee	muai)					action ID: f Disburse	ement		V * 1	v.
Mailing Address PO Box	3451				1 2		4	20	) 1 0 ·	
City Concord	State NH	Zip Code 03302			Amour	nt of Each	Disburs	ement t	this Pe	erio
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Candidate Name Mr. Charles Bass			Cate	egory/ ype						
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State: NH District: 02	2									
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NAME OF COMMITTEE (In Full)	, p									
American Hospital Association PAC										
Full Name (Last, First, Middle Initial) Friends Of Frank Guinta						n ID:	188 <sup>-</sup>	19629	)	
				1 2			D /	YY	0 1 C	Υ
Mailing Address P.O. Box 877				12		1	4	2	010	)
City Manchester	State Zip Code NH 03105			Amou	unt of	Each	Disbur	semen	t this F	Perio
Purpose of Disbursement Contribution		Г	011	<u> </u>	_			25	00.00	)
Candidate Name Mr. Frank Guinta		С	ategory/ Type							
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	General Debt Re									
Full Name (Last, First, Middle Initial) Tim Walz For Us Congress						n ID: burse	188 <sup>-</sup> ment	19631		
Mailing Address PO Box 938				1 <sup>M</sup> 2	M /	<sup>D</sup> 1	<sup>D</sup> /	Ý Ž	0 1 C	) <sup>Y</sup>
City Mankato	State Zip Code MN 56002			Amou	unt of	Each	Disbur	semen	t this F	Perio
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Candidate Name Rep. Timothy J. Walz		C	011 ategory/ Type							
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Full Name (Last, First, Middle Initial) LoBiondo For Congress						n ID: burse	1882 ment	24192		
Mailing Address P.O. Box 550				1 <sup>M</sup> 2	M /	<sup>D</sup> 2	0 /	Ý Ž	0 i c	) <sup>Y</sup>
City Vineland	State Zip Code NJ 08362			Amou	unt of	Each	Disbur	semen	t this F	Perio
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Candidate Name Rep. Frank A. LoBiondo		C	ategory/ Type							
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SUBTOTAL of Disbursements This Page (optional)			🕨	·				့ ဝဉ	טט.טע	)

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	HEDULE B (FEC Form 3X)	Use separate schedule(s	FOR LINE	NUMBER: PAGE 203 / 208
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	Information copied from such Reports and States or commercial purposes, other than using the name			
•	NAME OF COMMITTEE (In Full) American Hospital Association PAC			
	Full Name (Last, First, Middle Initial) IMPACT			Transaction ID: 18824193 Date of Disbursement
Ī	Mailing Address 509 Madison Ave. Suite 1902			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
	City New York	State Zip Code NY 10022		Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Contribution		011	1000.00
	Candidate Name IMPACT		Category/ Type	
(	Senate President	ement For: Primary General Other (specify)		2010 Contribution
	State: District:			
	Full Name (Last, First, Middle Initial) Boswell For Congress			Transaction ID: 18828229 Date of Disbursement
Ī	Mailing Address PO Box 6220			1 2 D 1 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Des Moines	State Zip Code IA 50309		Amount of Each Disbursement this Period
	Purpose of Disbursement Void of 9/10 Contribution		011	-2000.00
	Candidate Name Rep. Leonard L. Boswell		Category/ Type	
(	Office Sought: X House Disburs Senate President	ement For: 2010 Primary X General Other (specify)		Void of 9/10 Contribution

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$\rangle$	NAME OF COMMITTEE (In Full) American Hospital Association PAC								
	Full Name (Last, First, Middle Initial) Mr. John H Tobin  Mailing Address 64 Robbins Street		Transaction ID: 18799319 Date of Disbursement						
	City Waterbury	State         Zip Code           CT         06708-2600	Amount of Each Disbursement this Period						
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	Candidate Name	Categor Type	y/						
	Office Sought: House Disburs Senate President State: District:	ement For: Primary General Other (specify) ▼	Refund						

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NAME OF COMMITTEE (In Full) American Hospital Association PAC		
Full Name (Last, First, Middle Initial) Tim Bishop For Congress  Mailing Address PO Box 437		Transaction ID: 18819212 Date of Disbursement  M M M / D 3 D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
•	State Zip Code NY 11738	Amount of Each Disbursement this Period
Purpose of Disbursement Recount Donation Candidate Name	011 Category	2000.00
Rep. Timothy Bishop  Office Sought: X House Disburse Senate President State: NY District: 01	ment For: Primary General Other (specify) ▼	Recount Donation
Full Name (Last, First, Middle Initial) U.S. Treasury  Mailing Address P.O. Box 2188		Transaction ID: 18870814 Date of Disbursement  M M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Parkersburg	State Zip Code WV 26106-2188	Amount of Each Disbursement this Period
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Office Sought: House Disburse Senate President	ment For: Primary General Other (specify) ▼	Disgorgement of Stale Dat- ed Refund

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)					E NUMBER: PAGE 206 / 208 ly one)							3	
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American Hospital Association PAC														
Full Name (Last, First, Middle Initial) American Express						Date o	of D	sburs	eme	8868 ent				
Mailing Address Ste. 001						1 2 M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y								
City Chicago	State Zip C					Amount of Each Disbursement this Period								
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Mailing Address 1601 Elm Street						1 2	_		3	L	2	0 1 (	)	
Dallas	State Zip C TX 7520					Amou	nt o	f Each	n Dis	sburse	-			d
Purpose of Disbursement Merchant Fees			0	01			-	-			1	77.3	)	
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## **SCHEDULE B (FEC Form 3X)**

President

District:

FOR LINE NUMBER: PAGE 207/208 Use separate schedule(s) (check only one) **ITEMIZED DISBURSEMENTS** for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Hospital Association PAC Full Name (Last, First, Middle Initial) Transaction ID: 18868131 Paymentech Date of Disbursement 06 2010 Mailing Address 14221 Dallas Parkway **Building Two** City State Zip Code Amount of Each Disbursement this Period Dallas TX 75254 18.65 Purpose of Disbursement Merchant Fees 001 Candidate Name Category/ Type Office Sought: Disbursement For: House Merchant Fees General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: 18868132 Citibank, F.S.B. Date of Disbursement 20 2010 Mailing Address 1400 G Street, NW City State Zip Code Amount of Each Disbursement this Period 20005 Washington DC 9.82 Purpose of Disbursement Bank Fee 001 Candidate Name Category/ Type Office Sought: House Disbursement For: Bank Fee Senate Primary General

SUBTOTAL of Disbursements This Page (optional)	•	28.47
TOTAL This Period (last page this line number only)	<b>—</b>	270.90

Other (specify)

State:

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page (check only 21b [	22 23 24 25 26
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)  American Hospital Association PAC	, , , , , , , , , , , , , , , , , , , ,	· ·
Full Name (Last, First, Middle Initial) Bricker & Eckler PAC  Mailing Address 100 South Third Street		Transaction ID: 18872444 Date of Disbursement  12
	otate Zip Code DH 43215  010 Category/ Type	Amount of Each Disbursement this Period -500.00
Office Sought: House Disburser Senate President State: District:	* * * * * * * * * * * * * * * * * * * *	Void of 7/06 Check, See Line 29

SUBTOTAL of Disbursements This Page (optional)	•	-500.00
TOTAL This Period (last page this line number only)	<u> </u>	-500.00